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## ORIGINAL ARTICLES

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### THE CASTRATION COMPLEX IN WOMEN \*

BY DR. PAUL BOUSFIELD

PHYSICIAN TO THE LONDON NEUROLOGICAL CLINIC, ETC.

The castration complex in women has been recognized recently as being of great importance, but it is almost daily forced upon me that it is much more far-reaching and of even greater importance in their character formation than is frequently recognized. It should be hardly necessary for me to explain the meaning of the term "castration complex" as applied to women; but as the term in itself is a poor one, and since I often come across people who have no clear conception of its meaning, I will venture briefly to do so.

From earliest times the male genital organs have been used as the chief emblem of power and as one of the foundation-stones of primitive religions. There is no need to recapitulate the various forms which phallic worship has taken through all ages as they are already well known; but it is not generally realized that the symbol of the phallus has simultaneously been accepted unconsciously, by both men and women, as an outstanding mark of fertility, of potency, and of superiority. Strictly speaking, the word "castration" refers to the actual loss of those parts of the male genital organs which contribute to sexual potency, and, as originally used, the term "castration complex" referred to the unconscious fear in the male lest he should lose his potency. The study of the various ramifications of this complex, however, led to the finding that in many cases there has been no actual fear of loss of potency, but a fear lest potency and superiority should never be acquired. The fear lest potency should never be acquired implies at least the wish to acquire

\* A paper read before the British Psychological Society, Medical Section, October, 1923.

potency and superiority, so that now the term "castration complex" has come to mean, not merely the fear of losing the phallus, but the desire to possess the phallus; and in this latter form the castration complex is present almost universally among civilized women, just as in this previous form this complex is almost universally, although in a lesser degree, present amongst civilized men. I have had the opportunity during the last few years of studying the effects of this complex in women in several interesting cases, and it is the results of my observations which I wish to set forth here.

## 2

The castration complex differs from most of the other major complexes in that it is very largely a symbolic complex. Many of the major complexes are due to inhibitions of the primitive, or as Freud has called them, the component sexual impulses, and most of these primitive impulses tend to associate with, and to satisfy, narcissism and are in perfect harmony with it until the inhibitions come to play their parts. The castration idea is, however, a direct blow to narcissism and is antagonistic to it from the outset. Let me attempt to illustrate these ideas in a very simple manner.

Let us suppose that an individual has a strongly developed tendency to the primitive instinct of exhibitionism and that he has also a strongly narcissistic temperament. Undisturbed by other factors these two conditions are in perfect harmony and, having no inhibitions to the contrary, this individual will be able to fulfil the desires of both these tendencies by, shall we say, standing naked in front of his mirror and admiring himself. Should, however, the castration complex be present it may act as an inhibition to this course of action, and the unpleasant idea may be thrust from consciousness in two different directions according to the type of castration complex present. In the case of a female, to stand naked in front of a mirror in this way would be to call special attention to the absence of the phallus, and if the phallus has been ingrained in her Unconscious as an emblem of perfection and potency, the sight of her imperfection might strike a blow at that narcissism, which is continually attempting to feel this perfection. As a result a feeling of imperfection and shame would arise at the sight of her naked imperfection, and the reaction formation or characteristic which we know as modesty would be developed as a defense. Here let me lay stress on the fact that the whole of this process which I have discussed is unconscious, only the resulting emotion of modesty being



conscious; and further that I am assuming that no other determinants than those mentioned are present, for it is obvious that such determinants as sexual curiosity, etc., etc., might outweigh the other factors and produce considerably different results. In the case of the man the same reaction formation of modesty and shame might be expected were there any real deficiency in the development of his external genital organs, or did he merely believe them to be abnormal in any way. On the other hand, if the phallus were large and well developed, he might well take a pleasure in this form of narcissistic exhibitionism as a compensation for his unconscious feeling of phallic inferiority, and as a continual reminder that he had not lost those organs which he feared to lose. Let me summarize the ideas I have illustrated and which I shall have to enlarge upon during the course of this paper.

1. There is a conflict between narcissism and the fear of castration.

2. There is a conflict between exhibitionism and castration.

3. On the one hand exaggerated exhibitionism may act as a compensation for castration.

4. On the other hand there may be a tendency to suppress the whole idea of the phallus and its surroundings in order that it may not strike its blow at narcissism; in which case modesty, in regard to the phallic region, is developed as a defense reaction, and exaggerated exhibitionism is developed as a compensation.

In practice I have found the castration complex is almost invariably associated with narcissism and exhibitionism, in a manner somewhat similar to the actual examples I have just given.

### 3

Before proceeding further, I will quote a portion of the analysis of several dreams and will give a few details of the symptoms and conditions of the patients who had those dreams. No good purpose will be served by giving all the associations to other complexes present and I shall therefore not take the dreams sentence by sentence, but shall merely give a portion of the dream first, and a condensed statement of the associations bearing on the castration complex afterwards.

CASE 1. *Personal Characteristics and History.* A married woman, aged thirty-five, very "feminine" in her dress, outlook and ideals. She possessed a rooted objection to anything savoring of the "masculine" in women. All her life, as far as she could remember,

she had possessed in an acute degree modesty and feelings of shame in everything connected with sexual matters both in conversation and in sexual acts, at first in childhood and afterwards with her husband. Such was her modesty that when first she came to me the idea of lying on a couch in my presence was quite impossible, and she could only speak when she covered her face with both her hands. For some months previous to being sent to me she had had a "nervous breakdown" with obsessions and hallucinations. This commenced with a quarrel with her husband, in which, having been made to feel his idea of the inferiority of women, she had attempted to bite off his right ear. The same night she attempted to bite off her own right middle finger and her tongue. She then took to her bed and had visual hallucinations in which everything appeared very enlarged and during which, on looking at herself, she was surprised and horrified to find that she had grown very large, powerful and hairy. She was obsessed with feelings of guilt. These are the essential symptoms that had a bearing on her castration complex, and there were a very large variety of others, of which time and space will not permit me to go into details. One more, however, I will mention which like those I have already spoken of, she did not remember at first, and it only gradually came into consciousness somewhere about the fifth month of analysis. This was that she had retention of urine during her illness and that the nurse had had to pass a catheter on several occasions and that on these occasions she had phantasied to herself that the catheter was a phallus and that she was urinating like a man. This phantasy gave her considerable pleasure and she repeated it on several occasions. As I stated before, however, the mentioning of it was entirely suppressed for the first five months of analysis.

#### DREAMS AND ASSOCIATIONS

*Dream 1.* "I was walking along the seashore with my father. We were rounding the point when the tide cut us off. I was covered up to the waist with water. I took off all my clothes above the waist but it did not seem worth while to take the others off."

*Selected Associations.* "When I was eight I used to walk on the seashore with my father. I saw a naked man bathing once. I wondered if I were deformed when I saw the man; I wondered if my sisters were deformed; I wondered if my father were made like him. I knew I had been very ill when I was a baby and wondered

if perhaps my father had cut *it* off when I was a baby (it = the phallus). I felt very uncomfortable, and I think I was frightened. When I think of being covered up to the waist with water so that I cannot be seen naked a feeling of relief comes with the idea. I can't see *that* part of me—my father can't see *that* part of me—I don't like my husband to see *that* part of me—I never let him—I never use the commode in his presence. I was always extremely modest about these parts. The sea was like a kind of skirt. I kept my skirt on as well. Although I was naked down to my waist, the rest of me was hidden right down to my feet. I do not like people to see my legs or even my naked feet when I am bathing, but I like people to admire my bust and my face and my hair.

At this remark the patient blushed although her face was still covered with her hands while she was talking. When I asked why she blushed she said the thought had come to her that although she liked the hair on her head to be admired she disliked hair on any part of her body—on her arms or in the axilla—and was very careful to remove it always, as it reminded her of pubic hair which she hated to think of most of all. She went on to say that the hair on her head gave her a pleasant feeling of supremacy—the opposite of that horrid feeling she had as a little girl, when she felt that she might not be properly made. Presently she remarked that she had been very much startled by the pubic hair on men she had seen bathing. At a much later stage of the analysis, after she had discovered her castration complex, she came back to this dream of her own accord and stated that she was quite sure that the admiration she had for the hair on her head in reality represented her repressed desire to extol her own pubic hair, which she had associated with the idea of the growth of the phallus when she had seen naked men as a child. But since she had attempted to repress all thoughts of this region of her body because its incompleteness implied inferiority to her, she had compensated herself with the idea that long pubic hair was at any rate a part of that organ which signified potency to her. However, she was unable to consider the idea of hair on her body in any visible place because it called into consciousness ideas of manliness—puberty—and so forth, which in turn tended to remind her of her own phallic deficiency, therefore she had displaced the whole idea of hair to the head where she could glory in it as a symbol of potency, without the fear of it calling to mind her actual fancied deficiency.

I think this was an extremely interesting statement of hers, and

without being insistent on the point, it seems very probable that it may be the basis of the idea in the majority of women which causes them to keep the hair on their heads long and to attempt to conceal all the hair on their bodies.

A few other associations of the same dream may be of interest. She made a remark, "I should like . . . I mean I should not like an evening dress as low down as my waist. Canute comes into my mind, sitting on the seashore in his robes—'Thus far shalt thou go and no further'." Here the patient showed a compensatory exhibition idea had attempted to break through, but she immediately corrected it by denying the wish she had first expressed and then by choosing the figure of Canute, who is a man, but as he is dressed in robes and therefore to some extent disguised as a woman, she is again expressing, in a reverse order, what she herself desires.

*Dream 2 (from the same patient).* "My father was eating grapes. I held out my hand for him to give me some, as he generally would have done, but he put two large ones in his mouth and refused to give me any. I was very surprised and hurt. . . . (a long pause) . . . I then had the idea of a squashed grape, a third one. I do not remember about that distinctly and I woke up feeling uncomfortable and wet. I had started my period unexpectedly."

*Selected Associations.* "The two grapes suggest a vulgar conversation I heard when I was quite a little girl in which two school girls had referred to a man's 'bunch of grapes.' I did not then know what they meant. They also remind me of the fable of the fox and the grapes in which the fox, after failing to obtain the grapes, pretended that he did not want them, that they were sour. I expect," she added, "that this refers to my attitude towards the phallus. What I haven't got and cannot have, I deny the value of. I expect it is the same with other girls too—sour grapes."

The idea of her father refusing to give her the grapes, in her dream, at once recalled her previous dream to her, and she remembered the phantasy that he might have cut off her phallus at some time and, she added, "he might have withheld giving it to me, only this sounds nonsense."

The idea of the squashed grape recalled an incident of a few years previously, when she had sat on some grapes and stained her clothes. The stain would not wash out and she would not wear this skirt again, she said, "in case anyone should think I was unwell." She added here, "But I don't see what my periods have to do with

it. It seems unfair that women should have to lose so much strength every month." And a little later, reverting to the subject, she said, "It is as though one had an operation every month." On another occasion still (not in reference to this dream) she recalled that she had had phantasies as a girl, when first her periods had commenced, that possibly the bleeding was due to an old wound which had reopened, which might represent the underlying idea of the phallus. About this time she also recalled phantasies of her childhood in which she imagined herself to be a boy, and in which she tried many experiments with a view to being able to control the direction of her flow of urine.

*Dream 3.* "I dreamt that the three middle fingers of my right hand were cut off and I was very worried about it and anxious. At a later stage I found they were replaced by three false fingers, very beautiful, delicately made and curiously colored, the two outer ones having black knobs on them. I did not feel very comfortable with the replaced ones, they still seemed rather useless."

*Selected Associations.* The three fingers on the right hand were likened at once to the three parts of the male genital organs. She recalled that during her illness she had attempted to bite off the middle finger of her right hand, as a punishment for attempting to bite off her husband's right ear. She said that the idea of losing the three middle fingers of her right hand had conveyed to her a feeling of impotence connected with the fact that she was a woman. The false fingers seemed to her at once a symbol of her deficiencies and of the compensations she was always striving to make by means of "feminine charm," and she said that the black knobs on the two outer fingers seemed like "miniature heels—and I always wear very high heels," she said, "I feel less insignificant and not so much shorter than my husband. I like to feel tall and erect." At this point she stopped and showed considerable confusion, and when I asked her why she had stopped, she said that the thought of being tall and erect reminded her of the other functions and possibilities of the phallus.

These associations of the high heels seem to me extremely interesting and may be of considerable significance, with regard to the vogue of high heels among women generally in connection with the unconscious determinants which motivate it; especially when we bear in mind how frequently, in dreams and myths, the foot itself bears a phallic significance.



*Dream 4. The patient dreamt that her daughter, aged ten, was standing naked before her and that an oval bead necklace was issuing from her genital organs.*

In association with this, she said that when she was a little girl she had actually put a bead necklace in that situation to see what it looked like. She was disappointed with the result and hung it around her neck instead. Since that date she had always worn a necklace and was very fond of necklaces and large beads. Here again we apparently have a displacement of something hanging from the genital organs to an article of clothing, or an ornament dependent from another part of the body.

There were a large number of other castration dreams in this patient's analysis but no useful purpose would be served by detailing them all. It may be of some value, however, to point out what actually took place as a result of the analysis, which was of a comparatively thorough nature. The patient lost all her nervousness and began to sleep well and, towards the end of the analysis, began very rapidly to lose her modesty as she adjusted herself to the facts of the case and relinquished her unconscious phantasies. In consequence, she no longer covered her face with her hands when talking, as she had for the first few months, and she no longer retained the habit, which was very marked when she first came to me, of carefully pulling her skirts down to the very lowest limits of her ankles when she lay on my couch. Many other symptomatic actions of a similar kind also disappeared and she stated that they had disappeared, not only with regard to the analyst, but with regard to the outside world as well. Her own explanation of these acts, given towards the end of the analysis is of some interest.

She said that she had had to cover her face when talking of sexual matters because she seemed so naked. It seemed to her as though the words coming out of her mouth enabled me to see her and her deficiencies, and she felt as if, in some way, her eyes and mouth were sexual organs which I was looking at. This phantasy is a good example of the way in which ideas are displaced, as Freud says, "from below upwards," and in which ideas of beautifying the face act as compensations for the lack of the phallus on the one hand, and for the desire to call attention (exhibitionism) to the genital organs on the other hand, both of which latter ideas have been repressed largely by the force of the castration complex.

As regards the idea of covering her legs securely, she said it seemed to her as though she couldn't bear the idea of calling atten-



tion to the fork of the leg, and that she had therefore spread the idea of sex, in a modified form, all over her legs instead of having it concentrated in one place. She further said that, in allowing the sexual idea to return to its normal position, she had again desexualized her legs so that they no longer needed covering.

This explanation of hers may throw some light on the value of the skirt in general, and in particular it calls to my mind an incident of a school teacher who had insisted on all the girls wearing short skirts over their gymnasium knickers on an occasion when the matter had been brought up for discussion. It may, indeed, throw light on the general retention of the skirt as an article of clothing.

Instinctively the patient showed much less exhibitionism and, having obtained a sound outlook and equable poise, she did not continue the analysis which might have yielded rather interesting points had it gone on for a few more months.

I have pointed out a few of the more obvious deductions which arise in this case, but I forbear from making further comments until I have presented the matter of one or two further cases in which the same complex was well marked.

## 4

*CASE 2. Personal Characteristics and History.* A woman, aged thirty-five, well to do, extremely shy and modest, who found the utmost difficulty in talking to men on any subject, and very nearly as much difficulty in talking to women *if they were well-educated or intelligent*. She was very exhibitionistic in her clothing and very sensitive as to her looks in every respect. Her exhibitionism was very frequently curbed by the idea of what people would think of it—whether she was not dressed above her station in life, etc., etc. It appeared as if the complex were almost too near consciousness for her to indulge in it on occasion. She was excessively modest as regards anything whatever to do with her excretory or genital organs. In the company of either sex she was ashamed of her legs and was always afraid lest her skirt were too short. She was unmarried and indulged in a considerable amount of masturbation. For obvious reasons I will not go further into the details of her neurosis, except to add that she would never lie down on my couch and always preferred to speak with her hands covering her mouth.

*Dream 1.* The patient dreamt that a house had been left her by her father and that it resembled the Eiffel Tower. She tried repeatedly to enter the lower story of this house but, on each occasion, a

*mist came down and "hid the legs."* (She explained that by hiding the legs she meant the legs on which the Eiffel Tower stood.) Thus she was frustrated each time she tried to get near the entrance by being unable to see where the entrance was.

In the first series of associations to this dream, she herself suggested the Eiffel Tower as being a phallic symbol but added, "I do not see how my father could have wanted to give me one." Shortly afterwards she stated that the Eiffel Tower seemed to represent herself and again she was puzzled, because she did not see how a phallic symbol and she could be identified as one and the same thing, since she was obviously not a man. She then likened the mist that came down and hid the legs to a skirt, and followed on with a series of ideas concerning modesty and her dislike of the thought that other people should ever think, in any way, of her genital organs and she recalled how, even with her mother and sisters, she disliked even veiled references to her periods or to questions as to whether she would like to relieve her bladder. She added that her legs all seemed connected with this. At this point she propounded a problem, which she herself had been unable to solve, as to why she was so much addicted to masturbation when all her ideas were opposed to conscious thought on the subject of her sex. It was, however, at a much later period of her analysis that she suggested that it seemed to her as if masturbation were almost a *protest against her own modesty*.

Here we have some confirmation of the idea which has already been expressed by other writers, and by Abraham in particular, I think, that excessive masturbation in women is often a form of protest against, and compensation for, the lack of the phallus by assuring them of the possibility of attaining feeling in that region even though visual confirmation is absent. A somewhat similar cause of masturbation seems to be present among men.

The chief reason that I quoted this dream is because of its similarity to that of the previous patient, in which the skirt seems to be utilized (a) as a *denial of the fork of the leg*, and a means to *hide the deficiency*, and (b) as a means of *sexualizing the legs and returning to a more infantile form of sexuality in which the libido is no longer concentrated on a spot, but is diffused over a large area*.

*Dream 2. Her father had left her a butcher's shop. There were three pieces of meat hanging in full view on hooks. A woman customer called and said that she would have one of the pieces of meat. She removed it from the hook and cut it in two with a heavy butcher's*

chopper. *At this point the shop faded away and she found herself running down the street after the woman, she herself being naked. She had no emotion of shame, merely of excitement.*

*Selected Associations.* The woman was one, who some ten years previously had had homosexual relations with her. She recalled how, at this period, she used to delight in undressing in the same room as this woman, and in having her bath and coming back into the room where they both slept, with only a towel round her waist. She was always very modest with this woman, she explained, from the waist to the knees, but took considerable pleasure in the admiration which was bestowed upon the rest of her body by her female lover. This dream took place very much later in the analysis than the previous one and she had no difficulty in recognizing the symbolism of the first part of it. She said, as soon as she told me this dream, "There are those three phallic symbols again. Why are they always coming up now?" But she recalled one extra memory and that was that, as a little girl of about five, she had seen a small boy passing his water and that she was filled with envy to such an extent that she actually wept, and frequently in childhood she had wondered if later on she would grow a similar organ, and had had phantasies of punishing this boy for rudeness by cutting off his phallus. She was not at all sure that some similar phantasy about her father had not entered her mind, too, but of this she could not be certain.

In this dream we have once again a rather good example of the *substitution of exhibitionism as a compensation for the loss of the phallus*. We have it strongly marked in her associations and also in the displaced exhibitionism she showed towards her homosexual friend, and in the modesty which still caused her to wear a towel round her waist although she was prepared to go to such extreme lengths in her erotic friendship in all other directions. This was apparently the only erotic friendship she had ever had with a woman and after it ceased, owing to religious qualms troubling her, she had become more modest and depressed in matters of sex than even previously.

CASE 3. This case showed extreme modesty of the same type as the previous two, and the same concern about showing too much leg. I do not propose to go into the dreams in this case, for they were frequently of a similar nature to those already quoted, but one characteristic of the patient is well worth mentioning. She always liked to take the male part towards other women and, the more masculine

or more intellectual the other woman was, the greater was her desire to take this male part, but this was entirely unconscious with her and took the following form:

She liked to walk on the outside of the pavement; she insisted on carrying their parcels; she was extremely careful of their comfort and liked to prop them up with cushions; if they had so much as a slight cold she wanted to send them home in a taxicab and would even follow a friend home, if this friend were not feeling well, to see that she arrived safely and was made comfortable when she got there, *even though she knew that the friend hated this and strongly objected to attentions of this kind*. Similarly in the theater she would try to insist on the friend taking her seat if she thought a better view could be obtained and, if the friend refused, she would burden her with continual pleadings for exchange of seats throughout the performance, *well knowing all the time that she was thoroughly annoying her friend who was probably getting quite as good a view as she herself*.

The analysis showed that, while in a measure she had accepted her castration complex as referred to men, she could not accept it as referred to women and the more any woman showed superiority, or displayed any faculties she was accustomed to associate with men, the more did she try to show her own superiority to those women, and would behave to them in such a way as she would expect a man to behave towards a woman.

I might here add a note on the castration complex in certain men I have analyzed. The majority of men with a strong castration complex have a special tendency to show great courtesy to women, and, at the same time, a considerable although rationalized desire to prevent women from entering into any form of competition with them, on the grounds of their "physical handicaps." Analysis has shown that on several occasions such courtesy as giving up a seat in a tram to a young healthy girl, insisting on carrying her bag, and doing many other things similar to those of the woman whose case I have just quoted, in reality sprang from the castration complex in the man and the fear lest the person, who to him was obviously castrated, should prove his equal and hence confirm his own fear of castration, whereas, by proving his superiority, by showing that he was in a position to concede gracefully, he felt that he was confirming his own potency. The similarity of such a case as this, with the case of the woman I have just quoted, cannot fail to be seen and I shall have to refer to it again at a later stage in this discussion.

## 5

Let us now examine from these further examples which I have given what appear to be some of the features in common to be deduced from them.

1. *Modesty of an excessive nature appears to be a striking reaction formation.* We know that modesty is in some cases a reaction formation against exhibitionism, but we see here, that as well as being a defense against exhibitionism, it has a strong motive in keeping the castration ideas well out of sight.

2. *The general reaction formation noticeable is a tendency towards "femininity" so-called.* The patients had a conscious desire to be as different as possible from men in all conscious ways and to have diametrically opposite characteristics to those usually attributed to the male sex.

3. *There is a strong tendency to deny the fork of the leg and to resexualize the legs themselves.* It seems to be an attempt to decentralize the libido and revert to a more infantile and a more diffuse type. In this connection we see that the skirt may, at least for many women, become a mark of defense against castration.

4. *Exaggerated exhibitionism serves as a means of obtaining a feeling of potency once more, and serves as a protection of the narcissism of the individual, as well as to some extent a channel for the expression of the libido.* It will be observed in connection with this that there is a general tendency in the female, in desexualizing the genital areas, to displace, and to accentuate the sexuality of the other parts of the body besides the legs: *e.g.*, the arms, shoulders, face, but in doing so there is a continual attempt to avoid those forms of sexualization which remind her of male potency, as, for instance, the appearance of hair on any part of the body which is exposed, such as the arms or axillæ.

5. *There are certain symbols which are utilized to represent the phallus or phallic attributes and which appear to assist considerably in giving back to the patient her feeling of power.* We have, for instance, the necklace in the case of the first patient which was very obviously a phallic symbol: this patient also always wears a fur round her neck both in summer and winter, and she remarked of this in one portion of the analysis that it seemed to her a combination of necklace and hair, in other words, of the phallus and pubic hairs. (A similar idea was expressed by F. Alexander in his paper, "The Castration Complex and the Formation of the Character," in which



furry hide stands for collar and in which the furry hide served as a penis symbol according to other assumptions given in this same paper.) And this agrees with similar associations which I obtained from another patient in connection with her crucifix and rosary, which also to her obviously had strong phallic significance. Again we have the symbol of the hair of the head, which the first patient set considerable store by as a potent instrument although the hair of the body was unpleasing to her. Infantile associations connected pubic hair with adult love and potency and this idea was apparently transferred to the head where it was no longer in danger of being connected with anything masculine since men, for the most part, wear their hair short. Similar ideas of potency connected with hair may be seen in the idea that Samson's power lay in his long hair and in modern advertisements of hair restorers which state that the "glory of a woman is her hair," and so forth. In another patient whom I have not quoted, I found the breasts took on the part of phallic symbols, but this by no means is a constant symbolization for them, and several women in whom castration complexes have been developed did not attach any ideas of beauty or of power to the development of the bust, although other compensatory emblems were accepted freely.

6. *The idea that menstruation is connected with castration comes out vaguely in the first patient* in her dream about the squashed grape and her idea of possibly being deprived of something. It is not very clearly marked in this case but was much more clearly marked in another case which I have not previously quoted, in which the patient actually remembered as a very small child, when she and two or three other little girls were examining each other, having had a feeling of considerable dislike at the idea of the redness of certain of them in those parts, and all her ideas on the subject of this redness related to the idea of wounds and sores. A further memory of this same patient was of a desire, which led to tears when it was refused, that her mother would powder her genitals with fuller's earth as she did her baby brother's, the unconscious idea in this case being apparently that the powder assisted in the growth of the phallus.

## 6

I should like to add here a remark, made by the first patient on one occasion, which tends to bear out the main tenor of many of the foregoing remarks. It is of greater interest for the reason that it is by no means an uncommon statement to hear, and one which one



is inclined to pass over without much thought. She stated, in reference to a friend of hers whose exhibitionism was slight, who never admired her jewelry, and whose temperament she spoke of as masculine, "*I hate women who ape men.*" We examined this sentence rather carefully as she uttered it with considerable emotion. In the first place, why did she use the word "ape" instead of "copy"? As she herself said it was used in a derogatory sense. It meant that she hoped that such a woman could not be a man but only a monkey. It also meant that she feared the possibility that her friend might really be as potent as a man or a superior creature, and further, that, while she was forced to admit the superiority of the male in respect of the phallus, it would make her feel even more inferior were she to attempt to think that any other women had obtained potency, whereas she herself had failed. This sentence, "*I hate women who ape men,*" expressed both unconscious fear and envy of the woman who appeared to be approaching that condition of potency and at the same time denied its possibility by using the word, "ape." This episode may with advantage be compared with my reference to a similar condition in men who desire to prevent women from entering into competition with them on the grounds of their "physical handicaps" and who are annoyed, or otherwise disturbed, when they are not allowed to render various conventional courtesies to women. In both cases, the castration complex is disturbed.

## 7

We now, however, come to a rather startling fact. Whereas all the evidence I have so far given tends to show that "femininity" in women is largely due to a castration complex, Karl Abraham, a man whose work cannot but hold one's respectful attention, holds that the female castration complex leads to women who "love to exhibit their masculinity in dress, in the way of doing their hair and in their general behavior," and that it is found in a sublimated form in "masculine interests of an intellectual and professional character."

Here, then, we have the apparently contradictory result that both "masculine" and "feminine" types of women are abnormal and that there abnormality in both cases is caused by the same complex. This requires very careful examination, and we must ask ourselves several important questions. First, what do we mean by the terms "masculine" and "feminine"? Is our conception of masculine and feminine attributes a scientific one, or one entirely warped by our own complexes? Secondly, is the analyst himself sufficiently free

from a castration complex or a family complex, as compared with nonanalysts, to be able to view the attributes of a so-called "masculine" competitive and potent woman impartially? Thirdly, has there possibly been a tendency, on account of such complexes just mentioned, to draw too general conclusions from particular cases?

None of these points can be answered in full, nor with any degree of dogmatism, but the subject is an important one, and therefore attentive examination of them should be of considerable value.

Let us deal first with the meaning of the terms "masculine" and "feminine." As a rule, the use of the skirt, of the necklace or of long hair and the high heels which we have had to deal with in the earlier part of this paper is regarded as belonging entirely to feminine "nature" and the discarding of any of these attributes would, by many, be regarded as a desexualization of the woman and the taking on of the male characteristics. Obviously, from the evidence I have so far given, we are not entitled to look upon these facts in such a general light. In the cases quoted the skirt, the necklace, the hair of the head, and the high heels do not represent anything feminine as such, but merely a defense reaction against the castration complex, and their discarding would merely represent a progress from an infantile to an adult form of sexuality. They are not part of the normal feminine but an added series of emblems dependent on local conditions of civilization and environment. Indeed, far from being universal, there are many races of mankind in whom a complete opposite set of symbols exist, where modifications of this complex, or the absence of it in an exaggerated form, or the acceptance of the inferiority of women, has entirely altered their manifestations of sexuality. Thus in China, in many parts, the unmarried woman almost invariably wears trousers.

A similar argument holds good concerning much of our etiquette, and for many of the false ideas of the weakness and physical inferiority of women generally, which on the one hand serve as an excuse to the female to obtain certain prerogatives and hence spurious superiority which acts as a defense reaction to the idea of castration, and on the other hand, confirms the man with a castration complex in the idea of his own potency.

Again, it has been seen that, as a defense reaction against this same complex, there is a tendency to desexualize the procreative organs of woman and to spread the idea of sex over other parts of the body where the unconscious mind does not realize this so acutely, and where the accentuation of the legs is avoided. There is a tend-

ency to a reversion to *infantile impulses and aims*, and these *infantile impulses and aims* appear to be frequently confused with *feminine impulses and aims*.

The woman who remains infantile is termed "a feminine woman," but, in point of fact, there is nothing feminine about such infantile reversions, and in many cases equally infantile reversions have been observed in men who have been termed "effeminate men," when an analysis of their case has shown that in reality they are perfectly potent, and that their characteristics have merely been due to a holding back of the libido on the infantile impulses and aims.

There was an excellent paper by Dr. Beatrice Hinkle in the *PSYCHOANALYTIC REVIEW* of January, 1920, on "The arbitrary use of the terms Masculine and Feminine." The paper has its weak points and is not altogether without rationalization in parts, but in spite of this the writer has recognized many items of great value, amongst others that our particular standard of femininity belonged to a comparatively short period of time, and differed in various places. A few quotations from her paper may be of value at this point.

"Herodotus has made us acquainted with the status of women of ancient Egypt, recording his observations thus, 'They have established laws and customs opposite, for the most part, to those of the rest of mankind. With them, women go to market and traffic, the men stay at home and weave. The men carry burdens on their heads, the women on their shoulders. The boys are never forced to maintain their parents unless they wish to do so, the girls are obliged to even if they do not wish it.' We know from these accounts and much other evidence that the conception of the female as inferior was unknown among many peoples. Also in many of the more primitive races there is even now no such significance attached to sex. . . . For instance my own experience among the Malays of the Philippine Islands. . . . They manage the finances of the family and play a prominent part in all questions concerning the welfare of the family group. Their judgment and advice are relied on by the men, and there is no thought of their dependence or inferiority." And again, later, she points out, "The feminine characteristics are presumed to be passiveness, timidity, weakness, emotionalism, with instability and fearfulness as dominant traits, gentleness and sweetness, spirituality and chastity as her great virtues. *In short, all the qualities which we associate with infantilism, which is another word for the feminine ideal character.* So far has this insistence on feminine

inferiority been carried out that at one time it was even denied by Plato that women contributed anything to the being of their children. . . . All women are indiscriminately fitted into this formula and all men into the masculine conception. . . . I do not think it needs much power of observation to see that the real world utterly fails to be so grouped, and the terms 'male' and 'female' do not signify anything more fundamental than the character of the physical organs. How far and in what direction they affect the mental and psychic sphere is yet to be determined."

Doctor Hinkle follows this up with other more general observations, "One has only to study nature in her lower forms to realize that there is no fixity, even here, of the secondary sexual characteristics, but as the environment changes and the race alters, the supposed distinctive character of male and female changes its form. . . . In many species of the lower forms of nature, the female is larger and stronger than the male, and there are very many others where there is no appreciable difference between the sexes." She quotes Professor Lester Ward from his book, "Pure Sociology," where he remarks that "The whole phenomena of so-called male superiority bears a certain stamp of spuriousness and sham. It is to natural history what chivalry was to human history, a sort of make-believe play or sport of nature of an airy, unsubstantial character."

Not only are secondary physical characteristics entirely different in various forms of life but they are very indeterminate in different races of humankind. Whereas we are accustomed to view hair on the face as being a secondary male characteristic and as having a distinct connection with the potency of the sexual glands, we find that there are American races in which there is practically no hair on the face of the male, and yet their manliness and sexual potency is undiminished. There are even cases approximating this condition not infrequently met with amongst Europeans. It is quite true that the growth of hair on the face appears to have a connection with the testicles, but it seems possible that this may be of an adventitious nature, that is, it belongs rather to the internal secretions than to those parts of the glands connected with actual sex function, and it does not appear to have any *necessary* connection with masculinity. This is the more apparent when we realize that disease of the adrenal gland may cause the growth of a beard in women, who have no male glands or other male sexual characteristics. Similarly with pubic hair, which we regard in England as having a sexual significance,

yet in certain Asiatic races adults of both races have no pubic hair whatsoever, without in any way diminishing their sexual activity.

It is not my intention in this paper to discuss the relative position of men and women, but merely to add to this discussion some notes on the effect of the castration complex. I will not, therefore, proceed further in this matter of male and female characteristics. What I have said, I think, is sufficient to show that it is very doubtful if the terms "masculine" and "feminine" as commonly used, express true types, and it should be enough to make us extremely careful in the use of these terms when dealing with analytical types and complexes. I think that one may assume that the popular conception of masculine and feminine attributes is not a scientific one, but one warped by tradition and by our own complexes.

Let me once more call attention to the fact that the point under discussion is that, apparently according to the work published so far, both masculine and feminine types of women, using the terms in their popular sense, are dominated by the same castration complex, and that in respect of the masculine type, I have referred to an article by Karl Abraham.

If we examine Abraham's paper I think that we shall find that two sources of error have crept in. First, the terms "masculine" and "feminine" have been used without due consideration of their meaning, and secondly, he has a tendency to make sweeping generalizations from particular cases. Let me quote from his paper.<sup>1</sup> "There is a considerable number of women who are unable to carry out full sexual adaptation to the female sexual rôle. A third possibility remains to these women, namely, the way of homosexuality in virtue of the bisexuality common to humanity; they tend to adopt the male rôle in erotic relations with other women. They love to exhibit their masculinity in dress, in the way of doing their hair, and in their general behavior. Other cases approximate to this in which the homosexuality does not break through consciousness; the repressed wish to be a male is here found in a sublimated form, *i.e.*, masculine interests of an intellectual and professional character and other kinds are preferred and accentuated."

Now as regards the latter statement concerning "interests of an intellectual and professional character," this is surely an unwarrantable statement with our present lack of knowledge as to what con-

<sup>1</sup> "Manifestations of the Castration Complex," published in the *International Journal of Psycho-Analysis* of March, 1922.



stitutes a masculine or feminine characteristic. Indeed, in analyzing the interests and professions of various people one has long since come to the conclusion that they are, for the most part, based upon sublimations of primitive instincts which are common to both sexes. For instance, anal eroticism may be sublimated (according to its admixture with other elements) in chemistry, sculpture, in various forms of art, in various forms of collecting, and particularly in the collecting of money, etc., etc., so that the banker might be sublimating, on the one hand, the same complex as the girl painting a chest-of-drawers with white enamel would be on the other hand; and that one should be able to step in and draw a dividing line between the two, on either side of which one may say that male and female characteristics can be ascribed is, I venture to say, at the present moment quite impossible.

With regard to his earlier statement that "women love to exhibit their masculinity in the way of dress, in the way of doing their hair, and in their general behavior," *it is distinctly divisible into two parts according to the emotions which are found uppermost.* In the first place, these things are of themselves but symbols and like other symbols they are very far from always bearing the same significance. Or even if we admitted that they bore the same significance, we know that they may bear an ambivalent meaning.

It is quite true that a cursory analysis of many women of the *emotional suffragette* type showed a strong hatred of the symbolic superiority of the male, and an excessive reaction with the object of defending themselves from feelings of inferiority, in which they desire to take unto themselves all the symbols which they regard as being masculine in their own minds in the way of external appearance and behavior. On the other hand, there was an equally large number of suffragists who, in their strenuous denial of masculine superiority, *were extremely feminine* (using the term in its popular sense) *in their appearance and general behavior*, and this difference in their behavior was of course owing to their possessing different complexes.

There is, however, a large large group of women in whom the castration complex is much smaller, and who do not place the same significance upon these symbols for this very reason. I have analyzed one or two of this type of women, and have found full confirmation of this. One of these women, who was normal and happily married, came for analysis for professional reasons and not for purposes of her mental health which was eminently sound. She used to dress in



"masculine" clothes on her holidays and had her hair comparatively short. Analysis, however, did not reveal any castration complex at the bottom of these facts; her most pronounced complex was associated with the idea of efficiency, that she must not waste her time, and finally with anal eroticism. Her hair was cut short because she could not bother to waste time doing it, and her clothing was bifurcated on her holiday for the purpose of comfort. She refrained from wearing such clothing in town and generally, because it was more comfortable to do as other people did, and she had to mix with them in business. Her exhibitionism was small and for the most part sublimated. She believed in women possessing the vote on abstract grounds, but had no emotional feeling of injustice towards men, nor was she inclined to commiserate with women on account of their subjective state. Her heterosexuality was normal; her homosexuality less than is general with women. A castration complex was present, as it is, I believe, in all women, but it was not pronounced in character, and, *if anything, tended to retard rather than to accentuate her so-called "masculine" characteristics* which were built almost entirely round other complexes common to both sexes, and of which I have given some slight indication already. I found a similar state of affairs in other cases, and always find that they can be sharply diagnosed from the women who affect so-called "masculine symbols" as a defense against the castration complex by their *emotional tone towards the subject*.

At first I was somewhat astonished at the particularly sweeping statements of certain analysts on the subject, whose names I prefer not to mention, especially when they were often so circumspect and guarded when dealing with other complexes. I then noticed, both in their writings and speeches, that such analysts exhibited varying qualities of emotion when dealing with this subject. There was considerable pleasure shown in explaining away any pretensions of the woman to equality in any respect; and when they dealt with phallic symbols, there was a tendency to attribute real power to the symbol itself. I have noticed several examples of this recently.

At a lecture at one of the hospitals, to students of both sexes, a certain analyst was dealing with this subject in the popular manner, and he made reference to the fact, in a jocular manner, that girls with masculine attributes were showing envy of their brothers. A pleased smile spread over his face as he spoke, and the male students present cheered. Obviously, both he and the male students were pleased with the idea; it confirmed them in their own feeling

of potency and acted as a defense against their own castration complex. I observed a similar reaction in a review of a book of mine some time ago; when the reviewer came to some remarks which dealt with this subject in a manner not altogether to his liking, his emotion stirred him, he left the review of the book and started a review of the author, always a significant fact. "The author is probably afraid of women," she said, and, in making this statement, he probably projected his own fear which had been brought to the surface by the remarks he had read. Another factor which is likely to influence analysts as well as other people is, of course, their mother complex and also their narcissism. If they "possess" women, whether mothers, wives or daughters, it is obvious that narcissism is going to attempt to make them value their possessions as highly as possible, and, since before they were analysts they may have chosen their wives on account of their so-called "feminine characteristics" it is going to be extremely hard for them in the first instance, to reclassify their ideas of masculinity and femininity; hence they are not to be greatly blamed if, in this one particular subject, they tend to make sweeping generalizations and to formulate arguments from false premises. Here, then, I think, we have the explanation of the apparently contradictory results which obtain in the various views I have mentioned as typical results of the female castration complex.

Let me just summarize the facts as I see them without in any way attempting to dogmatize or to ascribe finality to them.

1. Many so-called "masculine" and "feminine" secondary characteristics are nothing but defense reactions against repressed complexes, the so-called "feminine characteristics" being, in many cases, merely infantile regressions. In both cases many of these characteristics are not in reality secondary sexual characteristics at all.

2. The most common defense against the female castration complex is so-called "femininity." It is the denial of forms of sexuality in common with the male, a regression to infantile modes of expression of the libido, a displacement of sex away from the sexual organs, an exaggerated exhibitionism as a narcissistic protection for the feeling of power, and in general, those characteristics which are called "feminine."

3. The castration complex in woman may take a form nearer consciousness in which there is a continual struggle to obtain "masculine" emblems of potency. In these cases, however, there is always, so far as I have been able to notice, a strong emotional

fear of man, a tendency to homosexuality, a sense of the injustice to women, and of the tyranny of the male. Such cases may or may not adopt masculine symbols in dress and appearance generally, and they may attempt to take up professions usually considered masculine in nature, *but the converse by no means holds good.*

4. The characteristic of the woman who does not suffer from a strong castration complex, or whose narcissism has accepted realism more readily than others, lacks in many respects so-called feminine qualities. She frequently lacks those infantile characteristics to which we have referred, her exhibitionism is far less obtrusive, her interests, business, and appearance may often be termed of the masculine type, but would be far better termed of the adult type, since they are not defense reactions against the castration complex but sublimations of other normal infantile characteristics which have taken an unhampered course in their development.

## THE MENTAL EFFECTS OF DEAFNESS <sup>1</sup>

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What are the mental effects of deafness? How do the deafened react psychologically to their handicap? What does deafness do to the mind?

To answer these questions is the assigned task of this study.<sup>2</sup> It necessitates first of all a consideration of what is meant by the words mind and mental.

The function of mind is one of adaptation of the individual to the world, to life, and concerns the correlation of all human activities as synthesized in an individual. The new psychology is, properly, the study of the technique of this adaptation and this correlation. This modern conception of the human mind is among the conspicuous scientific advances of the century. Herbert Spencer defined life as the continuous adjustment of inner to outer relations; and this adjustment is made by the organism in myriad ways—some motor, some emotional, some structural; some conscious, some unconscious; some happily, some unhappily. But the whole process of fitting in to the cosmos is our present conception of the function of mind. Conduct is but the end result of certain stimuli to which

<sup>1</sup> Presented before the American Federation of Organizations for the Hard of Hearing, Chicago, Ill., June, 1923, and printed in the *Volta Review* for October, 1923.

<sup>2</sup> Correlated with studies by the author of the mental effects of influenza, uremia and other physical diseases. See *The Relation of Feeble-mindedness and Tuberculosis*, *Journal of Outdoor Life*, 1920; (also in *Transactions 16th Annual Meeting American Tuberculosis Association*); see also *Psychoses Associated with Influenza*, *J. A. M. A.*, January 25, 1919, pp. 235-241, and *Archives of Neur. and Psychiatry*, September, 1919, Vol. II, pp. 291-337; also *Influenza and Epilepsy*, *Am. Journal Med. Science*, June, 1921, Vol. CLXI, p. 784; also *Influenza and Hypophrenia*, *J. A. M. A.*, October 16, 1920, pp. 1044-1051, and the various cross references there given.

our native instincts of self and race preservation demand and insure certain types of response.<sup>3</sup>

The distinction between mind and brain can often be made clear by the analogy of the lungs and respiration. It is true, of course, that the lungs are perhaps the most important single organic element in respiration, but it is not true by any means that they are the sole organ entailed in the act and significance of breathing. Neither, on the other hand, is the brain in any sense the sole organ of the mind. Purely physiological researches, particularly in regard to the automatic nervous system and the endocrine glands, would have made this seem probable even if the helpful inductions and deductions of the Freudian School had never been heard of. The function of the brain may well be dealt with in the old physiological neurone-building and the sensation-identifying terms, but the mind must be thought of in a far more comprehensive fashion.

This introduction is almost imperative in presenting a paper to a lay audience on so technical a subject as *The Mental Effects of Deafness*. It will be seen at once that this theme indicates an attempt at correlation of a functional and an organic concept. Deafness, as usually conceived, is a *brain* defect. One would get the impression from a survey of treatises on otology that *mind* defect from deafness need not be considered, and unfortunately the standard psychiatric texts are scarcely more helpful.

Accepting deafness as a defect of a specialized extension of the brain, what is the correlated and corresponding alteration in the mental functioning of the individual, *i.e.*, in his personal adaptations and adjustments?<sup>4</sup> Is there more to be considered in deafness than the cutting of a sensory tract, the elision of a channel for the perception of the outside world? Has hearing more to do with the life of man than that of mere auditory orientation?

With the brain of the deafened man, we are, then, not greatly concerned in this paper. This would, of course, relate not only to the diminution or loss of auditory perception tracts but also to those cortical areas which we have partially correlated with the so-called "memory patterns," "concept formations," "auditory association

<sup>3</sup> This is pointed out in a gratifyingly lucid style in the new edition of the textbook on nervous and mental diseases by Jelliffe and White.

<sup>4</sup> This is a sorry time in the world's history for the use of a once so useful term as "psychology," what with the rapid multiplication of commercial capitalizations of the word, with notorious unconcern for anything but its prestige.

centers," and so forth. These defects follow directly upon the perceptual loss and are important in the consideration of retardation in learning, a phase of this subject well presented by previous speakers.

Deafness as a *mind* defect, as contrasted with deafness as a brain defect, may first be studied inductively by regarding it as a form of inferiority dependent upon this organic defect. It will be recalled that Alfred Adler enunciated a theory in which he attempted to explain on a purely organic basis the facts that Freud had found and explained on a psychological basis. In spite of a bitter dissension between these two men and their followers, it is becoming increasingly difficult to see why the two points of view are not readily harmonized.

Freud's theories are borne out by our findings in the nervously sick patient, *i.e.*, the patient whose adjustment to the world is so poorly managed that the friction causes unbearable pain. Those theories carry us rapidly into the field of psychopathology to a depth which would not only be difficult of comprehension by a lay audience in the time at our disposal, but would, moreover, require a subsequent amplification to make their bearing on this present subject matter clear. I am inserting this and the next paragraph primarily for the benefit of those who are interested in relating the thesis which I am about to develop with orthodox Freudian concepts, *e.g.*, the so-called castration complex.

Loss of hearing reacts upon the individual in the sense that any deprivation does, but is augmented in its intensity by reason of the peculiar personalness of the loss. It is as if something vital to one's existence had been torn from him. Psychoanalytic study has shown that this deprivation complex has many roots in the unconscious, going back, to give only one example, to the period in early infancy when the nipple was torn from the baby's mouth, a period when the baby made no distinction between its own body and the body of the nipple and bottle or breast.

As a result of this deprivation (or rather, of these deprivations culminating in the deafness) there develops in the psyche, consciously or unconsciously, and as a matter of fact usually both, a Sense of Inferiority. For this sense of inferiority a compensation is attempted by the organism as a whole, and it is in these compensations or attempts at compensation that we are now concerned. These, in short, in a broad sense, *are* the mental effects of deafness.

Obviously this compensation effort may be attended by all degrees of success or failure. In general we may group the products



roughly for presentation into the satisfactory and the unsatisfactory without taking time to define the criteria of satisfactoriness.

#### A. SATISFACTORY TYPES OF COMPENSATION

We may think of the mental functions from a static point of view as being embraced in the processes of perceiving, thinking, feeling, and willing. This simply means that the mind acts by first *detecting*, then *comparing*, and finally *reacting* emotionally and volitionally to given stimuli. Since the unity of the organism implies a certain delicately maintained equilibrium involving all constituent factors, satisfactory adjustments to any type of mental injury are effected by certain alterations in each and all of these particular functions.

We may consider then that of the satisfactory types of compensatory adjustment to deafness there are *a priori* four types. Adjustment may be chiefly by perceptual compensation, intellectual compensation, emotional compensation, or by volitional compensation. Each of these will now be discussed in turn.

##### 1. PERCEPTUAL COMPENSATION

Adjustment to deafness by means of perceptual accommodations are of three types. There is, for example, the wholly conscious and deliberate development of a faculty usually remaining throughout life entirely latent. This is well represented in lip-reading—that remarkable science and art which is now being so splendidly developed in many schools over the country.<sup>5</sup>

The second type of perceptual accommodation is perhaps deliberately developed, once recognized, but it is usually found to be particularly easy to develop because of a more or less unconscious mechanism. I refer to those well-known overdevelopments of the other senses which the blind have presented so frequently. A recent case of Dr. T. J. Williams,<sup>6</sup> for example, is reported to have such extraordinary sense of touch that she can do many feats no less remarkable than that of reading the newspaper headlines by feeling them with her fingers. It is a little less obvious that the deaf and deafened do something similar to this in the adroit and skillful ways in which they use their eyes, not only to read lips but to appreciate unconscious movements and facial expressions on the part of those about them with whom they are trying to keep in touch.

<sup>5</sup> I am indebted to Miss Ella Case, of Los Angeles, for specific information about this movement.

<sup>6</sup> J. A. M. A., 79:1331, Oct. 14, 1922.

Much more important, however, than either of these perceptual accommodation types is the totally unconscious accommodation or compensation which forms the thesis of Adler's theory of the psychic compensation for organic inferiority. He finds in an unconscious and premonitory recognition of their specialized weakness the stimulus which made Mozart, Beethoven and Brückner musicians, which made Demosthenes and Moses great orators, which makes so many good cooks out of men with bad teeth and stomachs, and singers and speakers out of those with bad lungs. Adler points out that ophthalmological examination of students in the art schools indicate that some 70 per cent suffer from anomalies of the visual apparatus.<sup>7</sup>

What these unconsciously evolved compensations have accomplished and are accomplishing for the deaf we shall not know until more complete psychoanalyses of deafened people have been made and the results correlated. The facts already known are intriguing, but induction in this field is well known to be dangerous.

## 2. INTELLECTUAL COMPENSATION

There is, first of all, what might be called a philosophical reckoning. Various theses may be developed, as for example, the point of view that hearing is not an end in itself but only a means to an end and, provided the end can be otherwise obtained, is not worth having. Of course this is perhaps merely a popular elaboration of the scientific data which we are attempting to present in didactic form, but it can, nevertheless, be made very attractive and with the aid of hortatory rhetoric should do a great deal of good, far more, for example, than anything so cold as this presentation. I have found nothing better than "Deafness and Cheerfulness" by Rev. A. W. Jackson, published in Boston, 1901. I cannot refrain from pointing out that in spite of a progressive deafness which all physicians were unable to help, this brave man dedicated this book to his doctor and quoted his "beloved physician" as having said, "This is bad, very bad indeed . . . but has the thought occurred to you that it is a very poor bushel under which to hide your candle?"

Another philosophical attack is such an one as Ernest Calkins, of New York, recently developed in the *Atlantic Monthly* to the effect that the balance sheet of available joys for the average deafened person leaves him still happily solvent and hence deafness is, as Jackson's physician said, "a poor bushel."

<sup>7</sup> See Jelliffe's translation of Adler's *Organic Inferiority*, and see, also, Adler's *Neurotic Constitution* as translated by Glueck and Lind.

The trouble with all of these philosophies is that in spite of the most ardent presentation they leave the actual sufferer somewhat cold. They smack of the doctrine of sour grapes. They are more or less of the nature of placebos given to a patient sick with cancer. They are analogous to the silly exhortations which every nervous patient is obliged to endure from all his relatives and friends who are sure that if he would only buck up and get control of himself and try not to be sick, and so forth, that all his troubles would disappear. Anyone who understands the essential psychological nature of nervous diseases knows how much this is like telling a man in mid-ocean that if he will swim to shore he won't drown.

There is a second type of intellectual accommodation which is in the nature of a flight, but a worthy flight. This is brought about by the development of a refuge, usually in some avocation or hobby. The reading of books is one of the best. As a therapeutic measure as well as a hygienic preventive, this is exceedingly commendable. Of course a great deal could be said as to how we might best help the deaf in the selection of these avocations, but so much of this devolves upon the social worker and the otologist in the particular case that we could at most only lay down general principles which would probably be too broad to be specifically helpful.

### 3. EMOTIONAL COMPENSATION

The saving grace of a sense of humor ought to be mentioned here first of all. If the temperament of the patient is such that he can laugh with the crowd even at himself, he will be spared much suffering, and the very laughter will help him in a more general adjustment. Unfortunately, it is too often the case that the self-adulation of the patient is so great that this is impossible for him. These then are the more deeply wounded, and the psychic element of wishing not to hear complicates the organic lack. All deafened people are familiar with the fact that it is easier to hear pleasant than unpleasant things.

More ought to be said here about emotional compensations, but there is first more to be learned about our emotions and their management. We may chatter much about attitudes, good and bad, but the thing remains intellectual and hence is, after all, philosophical and already disposed of. The day comes, some of us believe, when the objective of education will be the training of the emotions and the will, instead of, as now, merely the perceptions and the intellect.

Until then we can offer nothing didactic. Some can smile, and will, and some cannot, and won't!

#### 4. VOLITIONAL COMPENSATION

All conduct, which is the flower of the will, the fruit of volition, is the product of the perceptual, intellectual and emotional forestructure. Hence we here really consider the totality of the adjustment. Volitional accommodation should aim at an achievement not in spite of, but because of, the affliction. This is the fertile mechanism of overcompensation. There is plenty of evidence that this can be done, that it has been done, and is being done. It is worth considering not alone as phenomenology, but because volitional compensation is likely to be stimulated by the inspiration of the knowledge of its possibility.

Some of the world's great who achieved not only in spite of but because of their deafness, have already been mentioned. To this list we should add a few others of the many deserving mention.

Sir Joshua Reynolds, the most popular painter of his time, who in one year had over six hundred sittings for portraits, became deaf at twenty-seven; the Earl of Chesterfield, Governor General of Ireland and one-time patron of Samuel Johnson, was deaf all his life and in his old age became blind. Other great figures in the world's history who have been deaf are: Harriet Martineau, philosopher, economist and author; Pinturicchio, a great painter of the fifteenth century; Caesar, the author, soldier, statesman; George Washington; Kitto, of Pictorial Bible fame; and of modern times, Theodore Roosevelt, Ismet Pasha, Carolyn Wells, Grace Ellery Channing and Dorothy Canfield Fisher.

Statistically it is interesting to learn that of sixty prominent New Yorkers, who are known to be deaf, thirteen are physicians—most of them otologists! Eleven are lawyers, so that these two professions in both of which hearing is so important, comprise 40 per cent of our list. Of the others, seven are bankers and seven are business men, six are commercial literary men (newspapers, etc.) and four are novelists; three are manufacturers, two are in religious work, and there is one in each of the following vocations: architecture, cartooning, farming, politics, teaching, general science, and music.

From the practical standpoint, the satisfactory placing in positions of employment of economically handicapped deafened is of tremendous value in their mental health. I have been made acquainted by personal investigation with the splendid work done by various

units of this organization,\* as, for example, that of the New York League under Miss Annetta Peck and her assistants. The social units developed by these leagues are of perhaps no less value than the employment bureau; both are certainly steps in the right direction. No social adjustment of this kind, however, should be done by the inexperienced without supervision, and every social worker should make himself thoroughly familiar with the modern textbook on sociology. I refer to "The Kingdom of Evils," by Elmer E. Southard and Mary C. Jarrett.

#### B. UNSATISFACTORY COMPENSATIONS (DECOMPENSATION)

Thus far we have dealt with satisfactory adjustments. There remain the examples of failure of compensation, the unsatisfactory attempts at adjustment.

Anyone can see that these failures can be of all degrees of completeness, or rather of incompleteness, since complete failure must be synonymous with death. Failure takes place when in spite of conscious efforts to suppress and unconscious efforts to repress the conflicts of wish and fact growing out of the deafness, the elements of the conflict occupy the stage rather than the product of a proper solution. The first human conflict is that of the baby's desire to holler and his desire to swallow—as Jelliffe puts it. He can't do both at once. Success demands that he holler first, till his milk comes, and then suppress this desire in deference to a more generally useful one. If the suppression fails, the two elements appear simultaneously in a disastrous gargle!

Kempf<sup>†</sup> has classified in certain major groups various manifestations of this failure in suppression and repression, listed in descending order of degree of failure. Thus he first considers (1) the simple *failure in suppression* which manifests itself (in our consideration as in any other, for deafness may be accepted as a type conflict nucleus, or complex) by painful awareness of the conscious aspects of the complex, *e.g.*, hypersensitiveness as regards the fact of being deaf. Next (2) Kempf lists mild *repression failure* manifested in a painful awareness of what should be unconsciously solved conflicts; analogous, in our case, to the psychic pain of the sense of

\* American Federation of Organizations for the Hard of Hearing.

† "The Mechanistic Classification of Neuroses and Psychoses Produced by Distortion of Autonomic-Affective Functions." *Journal of Nervous and Mental Disease*, August, 1919.



inferiority engendered by deafness. Kempf next (3) considers *symbolic compensation* efforts, made, as it were, to defend against the pains just described, by transmuting them. These are, strivings to win social esteem, stimulated by fear of failure, inferiority, ridicule, and so forth. This failure and this striving in spite of attempts at repression and suppression appears to the extent of the failure as tension, fear, shame, hate, fear of competition and of being exposed, suspiciousness, and sometimes as bodily symptoms, all of which are symbols of transmutations of the conflict unsuccessfully managed.

*Regression*, the fourth group, is a still lower adaptation to this failure; that is, there has been a partial failure to compensate in spite of all these strivings and all these transmutations and symbols and the mind regresses in its control of the organism to earlier, easier, and more comfortable irresponsible ways. The individual becomes more childlike, a condition known as psychic infantilism. There is a tendency to the evasion of duty and of responsibility, inefficiency, apathy, and above all, depression.

*Dissociation*, (5) finally, is a type of maladjustment, really an almost complete failure to compensate so that the individual is dominated by the uncontrollable unconscious. Then there appear as if they were part of the real life such very unreal things as delusions, hallucinations, etc. These, in short, are the types popularly known as the insane. Kraepelin and others have written about a so-called psychosis of the deaf, a kind of "insanity," which is particularly likely to develop in deafened people, but there are grave doubts as to whether it can be considered as having any recognized medical standing. It is certainly very rare.

Dr. L. B. Alford, of St. Louis, however, has recently shown in a careful study that "in certain cases of degenerative ear disorder there develops a specific type of nervous (mental) disorder which in its milder aspects is characterized by severe tinnitus, nervous instability and fits of severe depression and irritability and in the severe form is accompanied by auditory hallucinations often multiple, and with anxiety, but without marked deterioration, loss of insight or behavior disturbances. This disorder is not in proportion to the degree of deafness, does not appear to be of psychogenic origin and does not seem to belong to the ordinary neuroses or psychoses. As accounting for it Grey's theory of otosclerosis is favored. Grey advances that the entire auditory mechanism from cortex to skin

forms a biological and physiological unit and that in otosclerosis the unit is affected in its entirety by the degeneration."<sup>9</sup>

Of course some deafened people do develop these extreme maladjustments, these acute mental decompensations, although probably never solely because of deafness. It is interesting to consider in this general mechanistic connection that in those cases where deaf persons experience psychotic episodes, their hallucinations are very frequently of the auditory type, corresponding, of course, with the powerful suppressed wish to hear.<sup>10</sup> The content of the hallucinations (and delusions), however, is almost always of *repressed*, rather than of suppressed matter, *i.e.*, it comes up from the unconscious rather than from the foreconscious. The only repressed aspect of deafness occurs in those persons who deny to themselves its existence.

Bizarre conduct disorders of a pernicious type such as suicide and homicide are exceedingly infrequent in spite of the prevalence of depression and paranoid trends among the deaf. Only two cases of suicide are known to the New York League out of perhaps a thousand cases of deafness and, as it happens, neither of these two cases were members or beneficiaries of the New York League. It might be added that one of the two was a teacher of the deaf who was prospering in every material way, but who was well known to have been poorly adjusted irrespective of her deafness.

#### AUTHOR'S CLASSIFICATION

I prefer to make another classification of the unsatisfactory types of compensation to this particular deprivation complex. From a study of the subject, I find that there are two common pictures of mental abnormality seen in the deafened. One is a picture of emotional depression, of despondency, feeling of incalculable and irremediable loss, a sense of isolation, of hopelessness, etc. With this there is, of course, much self-depreciation and often fear and anxiety. The other type is one in which the individual becomes suspicious, basing the suspicion on the fact that people laugh at him or say things that he cannot hear which he believes are probably about him-

<sup>9</sup> Author's abstract in personal communication, October 1, 1923. The study was formally presented at the Annual Convention of the Central Neuro-psychiatric Association at St. Louis, October 20, 1923.

<sup>10</sup> See White, W. A., The Adlerian Concept of the Neuroses. *Journ. of Abn. Psychology*, August, 1917.

self. He comes to think that his deficiency is the chief topic of conversation and that because of it he is ostracized, persecuted, taken advantage of, and so forth. People who attempt to help him are very likely to be misunderstood. I have read some very amusing letters, amusing because of their pathetic distortion, in which the kindest of friends is berated for first one thing and then another, most of the points for special criticism being matters that the patient had herself decided upon and enforced. Obviously these patients are often a great perplexity to social workers and it is surprising to know how little attention has been given to a psychiatric study of them.

These two types may be thought of as those in which the imbalance is *self-depreciatory* and those in whom the imbalance is *self-appreciatory*. Both are actually phases of disorientation. The former leads to despondency and the latter to the so-called paranoid attitude (suspiciousness, ideas of persecution, etc.). The psychological theory about the matter is that the former takes place when there is a painfully wide discrepancy between the ideal which the ego has set up for itself (conscious and unconscious) and the individual which it finds itself to be; the latter takes place when upon finding this wide discrepancy he "projects" it, and berates a scapegoat in the outside world for his own sins. Often these sins are symbolic of acts or attitudes which he unconsciously desires, but his desire conflicts with fear of the taboos and of punishment for violating them. Thus, to think people were talking about one may be interpreted by the patient as a fear, whereas it stands in the unconscious as a wish, which fact is often obvious to everyone else.

#### SUMMARY

Finally, I may summarize the theme of this paper by reminding you of the fable of the fox who jumped long and hard to get some grapes and, failing, called them sour and walked away.

Such conduct was an unsatisfactory compensation of the self-appreciatory type. The fox could not get the grapes nor could he bear to face the fact that it was in himself and not in his stars, as Cassius could have told him. Consequently he projected the sourness upon the grapes.

This is not the only thing he could have done, however. He could have crawled away with his tail between his legs and thought how impotent and worthless he was, not to be able to get those grapes, shedding tears the while, and meditating suicide.

Æsop, being a pessimist, did not go on to say what sensible and satisfactory solutions the fox might have made. He might, for example, have made a perceptual adjustment; he could have gotten a certain amount of satisfaction from smelling the grapes, if grapes it must be, or he could have made an intellectual adjustment by considering the fact that grapes are poor diet for a carnivorous beast like a fox, beefsteak being not only more accessible, but preferable. He could have made a volitional adjustment and jumped just a bit harder and gotten them if they were really worth it, or he might have hunted up a box to stand on. And finally, he might have made an emotional adjustment and finding himself baffled on what must have been a rather ludicrous spectacle, that of a fox jumping up at a cluster of grapes, he might have accepted the situation with a sense of humor and as he trotted down the road had a good laugh over the flips of fate in a puzzling but lovable old world!

MULVANE BLDG.

## EXHIBITIONISM: REPORT OF A CASE

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### SUMMARY

Mr. W., the patient, was a missionary, age thirty-one. He was a college graduate, a man of force and ability, and had high ideals of private character and public service. While connected with a foreign mission, and shortly before he was to be married, he developed a compulsive exhibitionism which continued intermittently for six years and resulted in a scandal and forced resignation from his position. Each time the impulse came without warning and with overwhelming force. There was no orgasm or definitely sensual sensation, but there occurred what was described as a relief of tension. Each episode was followed by acute shame and remorse, but a certain characteristic optimism gave him confidence that the act would never recur and enabled him to ignore the past. After two months of psychotherapeutic study, he gained control of his perversion and in the three years that have passed there has been no recurrence. The humiliation of the exposure and the loyal coöperation of his wife were potent supplementary factors in his recovery.

### HISTORY

Mr. W. was the fourth of a large family of children. The father was a well-to-do New England farmer, a serious-minded, hard-working and public-spirited citizen. The home environment represented the best type of old-fashioned country life, with a religious atmosphere and Puritanical standards, but without undue repression. Several older brothers graduated from technical colleges and became successful engineers. The patient went through the public schools as an average scholar and mixed well socially. An academic college course followed, with industrial work through the vacations. He stood high in a scholastic way and was engaged in many other college activities.

As a boy, he was neither domineering nor timid, and got on well with playmates and others. As he grew older, he became more serious-minded, was very industrious, and rather aggressive in his



general relation to the objective world. In college he was known as a single-minded and hard-working student. He was sociable, a good talker, self-confident, and had wide outside interests in things of a more serious nature. He enjoyed work and was ambitious to succeed in whatever he undertook. His mood was characteristically cheerful and optimistic, and while naturally high-tempered, he had developed good control. At times he was overbuoyant, and stated he had more difficulty in controlling such tendency than he did the opposite one of depression.

He had always been of a somewhat nervous makeup, but with the exception of periodic migraine headaches, had for the most part been able to adjust himself satisfactorily to the various periods of his life without definite nervous symptoms. In his sophomore year at college he suffered for a time from sleeplessness and pain in the back of his head. There were no outstanding psychological stresses which bore any causal relation. He was advised by a physician to leave college, but determined to carry on, and gradually got relief from his symptoms. They were of sufficient intensity, however, to retain a vivid place in his memory.

He had average physical health till he contracted malaria some years after college. From that time on he had recurrent febrile periods which once required a long rest, and had considerably interfered with his professional work. There was also one rather serious attack of septicemia while in the Orient.

By his senior year in college he had fully decided on a missionary career, and soon after graduation he was sent to an isolated post in the Far East. His duties were chiefly concerned with teaching and he enjoyed them thoroughly. He was filled with zeal for the work and took active personal pride in his own efficiency. Loneliness was his greatest enemy and he suffered keenly from lack of social contact with people of his own age. After three years of this life, he became engaged to a girl slightly older than himself, whom he met at a mission conference. He was married two years later, with only a few brief meetings during the interval.

Two months before the marriage date, he had his first impulse to exhibitionism, and gave in to it at once. On this occasion, a native girl passed the open window where he was dressing. He was shocked at his own behavior and disturbed at the thought that the girl might report him, but did not anticipate a return of the impulse. It was not long, however, before the act was repeated under similar circumstances. Following marriage and assumption of normal sex

relations, it ceased wholly for a time, and for several years appeared but rarely. It then began gradually to increase in frequency, episodes averaging roughly once a month over a long period. For the weeks prior to public exposure a residence in a new position which was adjacent to a girls' school created the opportunity for free indulgence, and after vague rumors had been circulated for a time, evidence of his guilt became conclusive. He resigned his position and left at once for his home country, to seek medical treatment.

There was apparently no conscious preparation for the act, such as gradual increase of desire, with final giving in. He insisted that the thought of such behavior never entered his mind until the opportunity presented itself, when he would surrender to the inclination without time, as he put it, for the slightest resistance or struggle for control. An appreciation of the Oriental environment is necessary to understand the development of his symptoms and practice. It was the custom of the natives to perform the emunctory acts in any place by simply turning the back on other people. This made possible the gratification of the exhibitionistic impulses in the manner of an accident. While on a year's assignment in a civilized European country, he continued occasional indulgence before peasant women while walking in the country. A certain setting was required. The women must be complete strangers, although age and appearance made no difference. He must make sure that they saw his genitalia, but preferred that they thought him unaware of the occurrence. A woman familiar to him aroused no inclination. The sight of a man instantly inhibited the desire.

The patient was frank and earnest about his trouble and talked to the physician without reserve. He admitted that he probably would have made no move himself toward treatment if circumstances had not forced his hand; but excused this by his renewed feeling of determination and confidence after each lapse that it would never happen again. This seemed less strange in the light of some special phases of the man's psychology. He had an extraordinary capacity for ignoring the unpleasant, sometimes to the point of repression and amnesia. Both the patient and his wife furnished examples, of which the following was the most striking: While at one isolated post, he was much in the company of a girl of his own age, daughter of one missionary, and fiancée of another. One evening in the presence of other members of the family he took some playful liberty which seriously offended her. Next day both the girl and father brought the matter to his attention and wished an apology.

He himself had completely forgotten the incident, and never was able to recall any feature of it.

There were some unusual phases in his attitude toward his sex difficulties. While deploring them and seeking aid with evident sincerity, he lacked that sense of degradation and profound humility which often accompanies perverse sex tendencies. When not considering the special topic, his self-confidence and buoyancy appeared unimpaired. He seemed to look upon the matter as if his compulsion was in the nature of a more normal masculine weakness of a minor order, and was frank to say he would have felt more chagrined if his errors had involved ordinary illicit sex relations with other women. His wife bore out this observation and commented on the fact that after the exposure and resulting scandal he was better able than was she herself to face other members of the colony in carrying out business incident to their departure. It is, of course, possible that this might have been due to a high degree of courage and desire to spare his wife rather than to lack of an appropriate feeling of shame and humiliation.

#### SUMMARY OF ANALYTICAL STUDY

For a month the patient was seen an hour daily. A searching study of the facts of his past life was undertaken. In addition, a general educational program was carried out, dealing with the psychosexual development and mechanisms of character formation as outlined by the Freudian school. He proved most productive in his talk and writings, and furnished many dreams which, due to the amateur skill of the physician, did not receive much consideration at the time. He quickly grasped the significance of the dynamic approach to his difficulties and took great interest in psychological interpretations from an impersonal standpoint as well as in relation to his own neurosis. Past experiences gradually came to his mind, for which, in the beginning, there was no conscious memory. Nothing was brought out which had occurred prior to the fifth year. Some of the preliminary amnesias dealt with rather striking material and gave the impression that special repressive factors had been operating. For example, he did not recall the first episode of exhibitionism for some weeks. Previous to that he had described the second experience as the one which initiated the habit. The memory of the migraine headaches which had played an important part in his late adolescent life did not come to mind till late. Again, an experience of exhibitionism in childhood, while never really for-

gotten, did not appear in his spontaneous utterances for some time in spite of the fact that he appeared to be frankly searching for pertinent material.

On the whole, the facts of the history seemed to fall within a fair average for the developing American boy. His perverse compulsion in later life stood out in an isolated manner on a rather normal background of personality and adult sexuality. His family life was gone over in intimate discussion and appeared to be in every way normal and healthy. Both the father and mother were hard-working, earnest people, rather more severe than lenient, and with no particular intimacy with any of the children. The relation to brothers, sisters and other early associates likewise seemed free from anything morbid. His early boyhood was filled with objective interests, including considerable hard work. His sphere of activity was largely in the out-of-doors and away from the intimate home environment. Phantasy life was never in the foreground. He was extremely mischievous and often fairly sternly dealt with, but never bore resentment for long. The father was disappointed that the patient did not follow his brothers in choice of profession, but was willing for him to make his own decision, and helped him equally with the others. All the children looked back with pleasure on their life in the parental home.

The development of sex knowledge came largely from his observation of farm animals and nothing in the way of morbid curiosity was brought out. He showed the usual interest in the birth of his younger brothers and sisters, but on the whole took such matters rather lightly. He believed at first that they came direct from God through the agency of the doctor. The acquirement of more definite knowledge later brought no conscious conflict. He had no sex instruction from the parents, and the topic was never mentioned by them except a few times in connection with some vulgar play activities among the brothers, for which they were all punished. He remembered being told of the menstrual function by a hired man and getting into some difficulty with an older sister by questioning her about it. One occurrence, at the age of six, made a marked impression and may have had a bearing on his later perversion. While a group of children were returning from school, an older girl, under guise of fastening the patient's clothing, suddenly loosened it and exposed him publicly with resulting boisterous ridicule. His emotional reaction was marked, the feeling of humiliation standing out most strongly. He thought of the event frequently afterward.

Two years later, he met the same girl on a lonely road and suggested mutual exhibitionism. She did not take the matter seriously, and laughed him off. The acuteness of the memory of these episodes gradually wore off, but until well into adulthood they occasionally came to his mind, accompanied by rather strong affect. As noted previously, it seemed significant that in the course of analysis he did not mention the matter for some weeks. At twelve, he spontaneously started masturbation, after experiencing genital sensations in climbing a clothes-pole. From that time until eighteen he continued the practice. It was always secret and he never talked the matter over with his brother or others. From twelve to fourteen, he masturbated without shame, and then began marked conflict; finally, at sixteen, he visited a quack museum and was horrified at the gruesome exhibits. His conflict had to do with the harmful physical effects, rather than with moral considerations. During the last years of this practice he was particularly remorseful after each indulgence, but more due to the fact that he was unable to control the habit than from any feeling of sex humiliation or inferiority. At eighteen, he gave up the practice completely, and from that time until the development of his perverse compulsion, he was able satisfactorily to control all sex trends, at least so far as consciousness was concerned. There were no retrospective worries over auto-eroticism. At seventeen, he developed a distaste for vulgar stories. This feeling was strong, and through college years he often made himself unpopular by outspoken criticism of others on this topic. He never showed a tendency to cruelty to other children or to animals. In contrast, he described a peculiar exhilaration from the enduring of open wounds himself, such as a smashed finger, which was an entirely different feeling than came with pain such as that of toothache, where there was no visible lesion. He spoke of this as probably "ego worship," but also felt there was something more fundamental which was almost an enjoyment of pain. This subject of masochism was not developed further. With the exception of the above statement there was no evidence, either in history or general reactions, of such a tendency on any level. His sex life from eighteen to the time of his engagement was unusually free from crude erotic interests. He associated freely with girls and was popular with them, but was conscious of no other feeling than general social interest. This quiescent period, in contrast with the more crude expressions before and after, again leads to the implication that strong repressive forces were operating.



He was first engaged while a sophomore at college to a girl he met three years previously. A year later the engagement was ended at the girl's request, and his disappointment, while acute, does not appear to have been long-continued. He commented on his lack of erotic feelings during the engagement, in spite of many sentimental passages between them. During the last year of college, he had a close and seemingly healthy intimacy with an older girl, which never developed beyond the stage of comradeship. When he went to the Orient, the sex question in its crudest form was forced upon his attention and temptations were frequent. He had more difficulty in subduing erotic cravings than previously, but there was no compromise of principles as far as behavior was concerned. During his engagement, which ended in marriage, ideas of physical sex matters were quite prominent in his mind, but apparently not unduly so. For two years marital adjustments presented some difficulties; more temperamental than physical, so far as he was concerned. Finally, a wholly satisfactory harmony was established, and the two developed an unusually fine interdependence and comradeship. The lack of children was a keen disappointment to both.

The wife was a woman of superior intelligence and calm judgment. She was completely frank and coöperative in every way with the physician. She was somewhat rigidly bound by the formal religious doctrines and standards of conduct laid down by the Church, but was not without some degree of liberality and tolerance. She had known her husband for seven years. During their engagement he acted in a wholly normal manner, if anything a little over-insistent in his lovemaking. Shortly before their marriage he endeavored to take some liberties with his fiancée, which left her somewhat offended. The matter was not important, and in no way interfered with their future relations. After marriage he appeared normal in a sexual way, so far as she was able to relate. He was more highly sexed than the wife, who, for some time, was quite anesthetic, although a willing partner. He never in any way lost control of himself in a manner to shock her, or showed the slightest hint of perversion. Sexual relations seemed wholly satisfactory to him, although he recognized her coldness. She stated that he was even-dispositioned, optimistic, and jovial. He was popular wherever they went and was tactfully aggressive and successful in his work. He never showed evidence of guilt or self-accusation. Neither had she noticed signs of overenthusiasm and zeal which might appear as



special compensation reactions. She did recall that in their daily prayers he often asked in tremendously earnest manner for forgiveness of sins, in a way which she never felt called upon to do for herself. When the exposure of his habit finally came, he deceived her for a day or two, leading her to think it was an accidental matter. When he finally confessed, her first reaction was one of horror and loathing, but she soon convinced herself that the condition was a medical one, and was ready to stand squarely by him through thick and thin.

The patient's whole family had been actively interested in orthodox religion. His social life had centered about the church. On account of some earlier religious trends and an ability to speak in public, his pastor and others often urged him to enter the ministry. At college he was a leader in religious affairs. At first the social side appealed to him, but later he became more interested in the spiritual phases and in general service. He always obtained an extreme satisfaction in helping others. He felt positive that this was in the main a true altruistic expression and in no way compensation for inferiorities. He denied any definite call to the mission field, but thought that he drifted into it along logical lines. He felt that the example of a missionary uncle whom he had always greatly admired had influenced him as much as anything. His theological beliefs were broad. There was little of the dependent-child-father attitude in his relation to Deity. He leaned toward some uniform church, avoiding the conflict of creeds.

During the second month of treatment he was seen much less frequently and the attempt was made to build up inhibitions to the perverted compulsion which would be stronger than the impulse itself. Use was made in an educational way of the general dynamic factors which, according to the theory of psychoanalysis, are present in any such conditions. No intimate study of his dreams was made, and no attempt undertaken to work out the details of the mechanism operative in his special case. A review of notes on his dreams showed them to have contained considerable standard symbolism. The scene of many of them was laid in boyhood environment. The homosexual motive appeared a number of times in connection with brothers and playmates. One thinly disguised dream of sexual relationship with the mother was recorded. Flying dreams were common; also those in which he was preparing for a railway journey. In addition to these disguised expressions of sexual promptings were

frequent dreams of a more crude nature in which occurred exhibitionism by the patient or by women in his presence. These were often accompanied by marked anxiety.

In addition to the educational program, it seemed wise to the physician to use rather heroic measures in order to jolt the patient from the complacency which he maintained in regard to the whole matter. Dire pictures were painted of the outcome if the impulse was left uncontrolled. It was pointed out that it was in no way a solitary vice in which the man alone was to be considered, but the possible evil consequence upon the women concerned were drawn in no uncertain terms. He was told that eternal watchfulness was necessary and that he must drop the optimistic and light way in which he dealt with this subject, and regard it in its true nature as a serious mental and moral disorder. Such treatment was of course opposed to all theories of suggestive therapy. It was also taken up with the full awareness that a reactionary depression might result, as the patient realized the enormity of his psychopathy. This did not prove to be the case, and when treatment was discontinued he left the physician's care hopeful, confident and appreciative. Favorable signs occurred during the last few weeks when, on two occasions, he was faced with situations which gave rise to the impulse to exhibit, but which were controlled by an equally strong inhibition. He stated that such a result was entirely novel in his experience with the habit.

A number of letters have been received from him during the past three years. He moved to a distant section of the country and has established himself industrially and socially. He states that he has no serious difficulty in controlling his tendency to exhibitionism and, in fact, seldom has the slightest inclination. He admits that he avoids, where possible, opportunity for temptation. In general, he shows a more chastened spirit and a healthy attitude of humility toward his past difficulties. He feels that the physician's influence was of value, but implies that the understanding sympathy and loyal backing of his wife has been a sustaining factor in his improvement, without which he might have relapsed.

#### FORMULATION OF PSYCHOPATHOLOGY

The patient's compulsive perversion is assumed in this discussion to have originated on the psychological level. The connection of underlying biological factors; or of physical states, such as chronic infection, seems too remote for any practical consideration. Three years of freedom from symptoms may be looked upon as a social recovery, and yet it is wholly probable that deep-seated de-

termining influences toward recurrence still remain. The possibility must be faced of return of the compulsion during later years in the event of some external deprivation in his love-life, or associated with beginning senility.

The following facts stand out as significant in the development of his obsession.

At the age of six, a sexual trauma occurred, when he was exposed by an older girl. This produced a marked and complex emotional reaction, and may have importantly conditioned the evolution of his psychosexuality. His struggle with masturbation during adolescence was longer continued than usual, and the conflict was profound. In contrast with this self-indulgence were sustained religious interests and general high ideals. These powerful opposing forces operated on the background of an extraverted personality with an aggressive and ambitious makeup. One may infer an exceptionally strong sexual drive finally subdued and controlled more by old-fashioned religious repression than by any real adjustment.

A period of quite complete abeyance of the sexual life followed, so far as conscious awareness was concerned. He associated freely with girls of good character while erotic fancies or desires seldom entered his mind, and he was wholly free from sexual temptation. He was at the same time somewhat morbidly sensitive to vulgar and obscene talk.

Suddenly thrust into a primitive Oriental environment, he found a wholly new situation to meet. He was deprived of the social outlet to which he had been accustomed, and at the same time was faced with the sexual problem in its crudest form in his relation with the native population. After a year, his own engagement forced in another way the consideration of physical sexuality.

Adjustment by repression was no longer possible. The compulsion to exhibitionism came to light as a morbid component of his sexual makeup which previously had been held restrained *in toto*.

There appeared to be present in his mental life something allied to a hysterical dissociation. This was shown by the volcanic-like activity of his perversion and in the astonishing detachment which he had been able to assume in regard to it. The same dissociative tendency was borne out by various instances of purposeful evasion and amnesias of which illustrations have been given.

No doubt a more complete study of this man's neurosis along psychoanalytical lines would reveal more fundamental disorders of his psychosexual life and do much to insure maintenance of self-control for the future.

## ON THE COUNTER-TRANSFERENCE IN PSYCHOANALYSIS \*

BY DR. ADOLPH STERN

The transference, as you know, in both its negative and positive phases, creates in the course of a psychoanalysis an interesting situation, in which the analyst is endowed by the patient with qualities, and to him are displaced emotions, of varying and opposite kinds, brought en masse from infantile situations and individuals of great significance to the patient in his infancy and childhood. On account of this transference on the part of the patient to the analyst, everything said or done by the analyst will have a highly suggestive value or effect on the patient. As you know, the effect on the patient of communications made by the analyst, certainly in the phase of the treatment during which the phenomena of the transference are not consciously known to and accepted by the patient, is determined in a great measure by the nature of the transference at the moment, that is, whether the transference is of a positive nature, and is acting as a coöperating influence; or whether the transference has itself become the most important temporary source of resistance. In the former instance the patient may accept everything blindly, as emanating from the fountain head of all knowledge, the analyst; in the latter instance everything the analyst says may be viewed with the greatest skepticism, doubt and suspicion; and the knowledge previously accepted may now be completely discarded. The ultimate purpose of the analysis itself is to open gradually the closed pathways from the infantile or early childhood periods to the present, thus enabling the patient, by living over again in the transference, to see his past repeated therein; gaining in the process a more objective view of both periods, approaching thereby nearer to reality. The closer the approach to reality and objectivity, the less marked is the suggestive effect of the psychoanalytic therapy. That suggestion wholly disappears as a therapeutic agent in the psychoanalytic treatment, is ques-

\* Read at a meeting of The American Psychoanalytic Association, held in Boston, June 3, 1923.

tionable.<sup>1</sup> Nor as a matter of fact is it necessary that it should, in order that we may, in spite of its presence throughout the treatment, still view the psychoanalytic method as a nonsuggestive therapeutic measure in the commonly accepted meaning of suggestion. As you know, the object of psychoanalysis is to give the patient a more liberal use of his libidinous energies with consequently increased ability in the direction of work and happiness. This brings him in closer contact with reality, but fortunately not wholly beyond the influence of suggestion from his environment, or from his ego-ideal, which in part at least is a product of environmental influence.

This extremely condensed description of the transference and incidentally of the aim of psychoanalysis is given as an introduction to the subject of the paper; namely, the counter transference. This can be defined as the transference that the analyst makes to the patient.

It is an axiom that the success of the psychoanalytic treatment depends on the skillful handling of the transference. So much transpires in it that is strange and surprising to the patient, even though the completion of the treatment demonstrates to him that the whole process of the transference merely repeats what he had gone through in his early life, certainly in a period of his life antedating his taking up the treatment. As far as the analyst runs the danger of making the most awkward, and to the results of the treatment the most

<sup>1</sup> While the presence of the transference carries with it suggestive influence during the course of a psychoanalytic treatment, yet for the sake of clearness it is well to say a few words in this connection, even though not especially germane to the subject of the paper. We know that frequently enough we get good results very quickly after treatment is begun, but to quote Freud in this connection, "We see in results that are achieved too quickly a hindrance rather than a furtherance of the analytical work and repeatedly we undo these results again by breaking up the transference upon which they rest. Fundamentally it is this feature which distinguishes analytical treatment from the purely suggestive technique, and frees the analytic results from the suspicion of having been suggested. Under every other suggestive treatment the transference itself is most carefully upheld and the influence left unquestioned; in analytic treatment the transference becomes the subject of treatment and is subject to criticism in whatever form it may appear. At the end of an analytic cure the transference itself must be abolished; therefore the effect of the treatment, whether positive or negative, must be founded not upon suggestion but upon the overcoming of inner resistances, upon the inner change achieved in the patient, which the *aid of suggestion* (italics mine) has made possible." Introduction to Psychoanalysis, English trans., page 392.



serious mistakes, it is during the period of the transference on the part of the patient to the analyst. Freud makes it a rule, with few exceptions, that whatever transpires in the course of a psychoanalytic treatment is to be viewed psychoanalytically; and all associations in reference to the analyst as transference phenomena. For even to the trained analyst the transference of the patient to him brings up problems and situations that are strange and puzzling, and unless his technique is good, he runs the risk of stepping out of the psychoanalytic situation, falling thereby into a trap that all patients set for the analyst. It is during the period of the transference that the patient brings to bear on the analyst all of his or her libidinous and ego strivings or impulses to make the analyst actually step into the rôle of an imago, and to participate actually in the situation unconsciously occupying the patient at the moment. This holds true both for the positive and the negative phases of the transference.

The above situation, namely, the transference of the patient to the analyst, serves to create a very important, if not the most important source of the counter transference. This, however, is a source of danger in so far as the resistances of the analyst are of serious moment, or if he has what may be termed weak spots in the field of his transference capacity. This serves to emphasize once more the necessity of the analyst having himself been analyzed before undertaking the analysis of a patient; for a self-analysis will give him not only technical knowledge, but also a knowledge of his own unconscious; this latter serves to minimize the untoward effects of his resistances to the unconscious of the patient, and to render him less liable to form obstructing transferences to the patient. The task of the analyst is made easier with increasing experience, especially if in that experience he included the recognition of the sources of mistakes in the technique, due to the counter-transference. For faulty technique is at times due to the counter-transference, in that the existence of the latter prevents the recognition of the significance of the productions of the patient, and is responsible for the making of false steps by the analyst.

Theoretically, the counter-transference on the part of the analyst has the same origin as the transference on the part of the patient; namely, in the repressed, infantile material of the analyst. By the same law, it may manifest itself in any form that the transference does. Practically, however, owing to the previous training that the analyst has undergone, his theoretical knowledge and his actual



clinical experience reduce considerably the field of activity of the counter-transference in comparison with the protean forms which the transference takes in patients.

The objective attitude of the analyst, the passive rôle which he maintains during the course of an analysis, has been frequently stressed. This, however, does not mean that the analyst is lacking in interest, either in the personality of the patient or his problems; nor does it mean that the sympathy of the analyst is not aroused by the patient's problems or experiences; nor that the personal likes or dislikes of the analyst in respect to the patient are not aroused. Often enough cases are devoid of interest, and make their treatment a monotonous task for the analyst. The feelings thus aroused are not such as may to any appreciable extent modify the technique of the analyst. They indicate that a certain amount of counter-transference normally exists in the psychoanalytic treatment, and this in a measure can be compared with a corresponding mild positive transference present on the part of the patient; this transference offering no special difficulty as far as the progress of the treatment goes, and can be regarded as the normal residue after the unconsciously determined transference is laid bare and interpreted by or for the patient.

The libidinous and ego impulses are both involved in the counter-transference, and as was indicated above, it is during the period of the transference on the part of the patient that the serious phases of the counter-transference make themselves manifest; the transference creates a situation that makes demands upon the analyst which he cannot properly meet unless his technique is good.

Freud<sup>2</sup> states that the beginner in psychoanalysis seems to make it his first task to interpret the associations of the patient, and to get as rapidly as possible to the repressed material. Only later does he learn that the transference phenomena present the chief problem. In another article,<sup>3</sup> *Zur Einleitung der Behandlung*, Freud further states that the transference itself should not be touched, but allowed full play, as long as the associations of the patient flow freely, and progress is being made. The transference should be taken in hand only when it manifests itself as resistance.

These two references are made to indicate the important rôle that the transference plays in the analytical treatment; important especially

<sup>2</sup> Sammlung kl. Schrift. zur Neurosenlehre, vierte Folge, "Bemerkungen über die Übertragungsliebe."

<sup>3</sup> Sammlung kl. Schrift. zur Neurosenlehre, vierte Folge, "Bemerkungen über die Übertragungsliebe," p. 412.

for the reason that during its development apparently new phenomena manifest themselves; these are very likely, unless the analyst is well prepared, to evoke emotions in the analyst, which may seriously interfere with the progress of the treatment; Freud's advice to allow the transference full play until it itself becomes a source of resistance is very sound and good technique; the advice takes it for granted that the analyst is master of the situation, and is prepared at the appropriate moment to break up a transference, which while very pleasant for the patient, is of itself no indication of progress in the treatment.

To illustrate one of the most common sources or examples of a situation in which the counter-transference may appear, let us take what Freud describes in the article first quoted, in which the patient, a female, falls in love with the analyst, and declares it in ways dependent upon her upbringing, social position, etc. The supposition is made that the analyst on his part feels a reciprocal emotion. One of several possibilities is likely in a situation of this kind. If the analyst and the patient are so situated that no ties bind them elsewhere, a marriage between the two may appear to be one way of terminating the treatment. There is this to be said for such a situation. In the first place a very safe rule to follow is that a patient should make no important decisions during the course of a psychoanalytic treatment. So that a marriage on the part of a patient while in the midst of a "transference love," as Freud calls it, is not a very safe procedure. Secondly, on account of the existence of a neurosis, the patient cannot enjoy actual satisfaction (*Befriedigung*) until the repression-resistances are cleared up.

Another solution to a situation in which the analyst has transferred to the patient is to discontinue the treatment. However, this is no nearer a solution, actually, than the before-mentioned attempt at solution. If one were to obtain the subsequent history of such a patient, it would show that the patient repeats the same procedure on the next occasion of a psychoanalytic treatment; a previous history of such a patient will show that she readily and repeatedly falls in love. Freud calls such a love a "transference love," and not an adult falling in love, though in reality it is no easy matter to distinguish between the two. What concerns us more in this instance is the fact that the situation involved the analyst in the counter-transference. Had the analyst under the circumstances followed the rule that everything that takes place in the course of a psychoanalytic treatment in reference to the analyst, is a transference phenomenon, he would have realized that the patient was not in love with the

analyst, but with the imago with which the analyst was identified; that explains also the fact that the patient would repeat the procedure on any occasion, or in any situation in which she found an unconscious identification with some infantile love-object. While a counter-transference may arise independently of the transference, yet it is evident that in a situation such as above described, in the situation of female patient and male analyst, in which the former uses all the subtle means, thoroughly feminine, which a clever and attractive woman has access to when wishing to exert her charms upon one she loves, but of whose love in return she is not assured, there is a greater likelihood of emotions being aroused in the analyst. Freud shrewdly remarks that the coarse, patent, frankly sexual appeal is one that is not likely to evoke in the analyst emotions that can endanger his maintaining complete control of the situation. In case the analyst is not well fixated to his love-object, the intimate situation created by the transference, announcing in so many evident, yet subtle ways the high and tender regard in which the patient holds the analyst, may well make it a very difficult matter for him to maintain a psychoanalytic attitude, indicating on his part a realization that the affects manifested by the patient have no reference or little reference to the analyst as a real person, but mainly if not solely to his being an imago of some childhood or early love-object.

The details of a situation as above described may consist in the following: The patient, a female, fixated on the father, transfers to the physician as the long sought for father imago, one who now can supply that which she believes the father denied her in her early childhood, namely, his love, which was given in the course of events to the patient's mother. An unhappy marriage, or her single condition, is the cause of a high libidinous tension, seeking outlet or discharge. It must be kept in mind that we are dealing with love that has unconscious determinants, and in this respect differs from so-called normal love. The complement to this is furnished by the analyst, who may unconsciously be fixated on some taboo female family-member; the analyst may be one who has not been able to sublimate this incestuous fixation, and has not on that account, if for no other, been successful in displacing his love with any degree of permanence on a female outside of the family group. A situation such as has been described is one that may more or less completely take the analyst out of the psychoanalytical rôle, with results disastrous to the success of the treatment.

Evidences, less outspoken than the above, of the existence of a

counter-transference, are by no means uncommon, and while not as serious in their consequences are by no means negligible. One instance of it, present only in the case of the beginner in psychoanalysis, consists in the attitude he takes towards the good results so often present early in the treatment of a patient. The analyst is apt to take much credit to himself for the marked improvement in the neurotic condition, indicating that he has failed to recognize the agency of the transference in this situation. The major element of the counter-transference is apt to manifest itself when, in this particular instance, the negative phase of the transference becomes active. The analyst is apt then to become very irritable with the patient, blaming the latter for much for which he himself is to blame, in that he took credit for that to which he had no right. Not only is there under such circumstances the presence of bad technique, but also an egoism or a narcissism that has contributed to the difficulty. This narcissism becomes an obstructing factor when the analyst accepts as pertaining to his real self that which the patient, in the form of praise for the great skill of the analyst, and gratitude for the great benefits the former has obtained from the treatment in so short a time, lavishes, with a great show of earnestness and sincerity, upon the father imago, found in the person of the analyst. With the sudden vanishing of the favorable picture due to the positive phase of the transference, the negative phase appears, and with it the return of all the symptoms, and with perhaps the appearance of new ones in addition, with the absence of all effort in the direction of coöperation on the part of the patient in this situation; the resistances of the analyst, in respect to his own narcissism now cause him to view the erstwhile model patient as an obstinate, self-willed, dull person, who persistently refuses to understand what is so clear, and what the patient had previously accepted in the way of psychoanalytical interpretations and information. The patient is blamed and scolded, and unless the analyst realizes his mistake arising from the two sources indicated, the treatment will likely soon be terminated either voluntarily by the patient, or by the physician, with the remark that the patient refuses to get well.

During the negative phase of the transference, when the patient complains of the fruitlessness of the treatment, of which there seems to the analyst to be at the moment so much evidence he, not realizing the source of the untoward signs, may blame himself, in his own shortcomings, for the state of affairs. In actual practice, however, we know that both these phases make their appearance irrespective of

what the analyst does. They are inherent in the nature of the neurotic disturbance, in the neurotic make-up, being dependent for their occurrence upon the unconscious strivings of the patient. The self-criticism, the feelings of inferiority, and even of guilt, arise in the analyst, not from the situation in hand, but from the analyst's own repressed narcissism, if not from repressed libidinous impulses in addition. To compensate for these inferiority or guilty feelings, the analyst may be prompted to step out of the psychoanalytic rôle, and take on the rôle of forcibly urging the patient on to greater effort, or of assuring, comforting or calming the patient. In the positive phase of the transference, as you know, patients freely express to the analyst their praises, and the high regard in which the latter is held, dwelling on his wisdom and the great value of psychoanalysis. So in the negative phase we see the obverse of the picture, and many patients freely express their uncomplimentary opinion of the analyst and of the treatment in this phase, as others do in the positive. This may give rise, on the part of the analyst, to expostulations, arguments, attempts at justification and explanation. It is quite true that what has just been described may well have been put under the head of bad technique; it is bad technique, due to lack of knowledge and of experience of the analyst; in part at least the difficulty also arose from the lack of sufficient knowledge on the part of the analyst, of his own unconscious along certain lines.

The homosexual, or better, the homoerotic, according to Ferenczi's terminology, also offers difficulty in the course of the analysis, and like the other occasions for the appearance of the counter-transference, it is the occurrence of the transference that brings out the counter-transference in this instance also. It is well known that the bringing to the conscious of the patient, of his repressed homoerotic component constitutes one of the most difficult, if not the most difficult task of the analyst. The homoerotic is one of the most deeply repressed of the libidinous impulses, whose entrance into consciousness meets with strong resistances; evidences of its existence in the unconscious appear, in consciousness, very thoroughly disguised. Of especial significance is that phase of the homoerotic libido which goes to form the feminine attitude (*Die feminine Einstellung*). In analytical work it is often found to constitute the last stronghold of a powerful resistance to the work, and its clearing up serves to dissipate the last evidence of persistent neurotic disturbances. Let us for a moment very briefly review its genesis. When the boy withdraws his love from his first love-object, the mother, and then chooses his



father as his love-object, he identifies himself with the mother, and loves the father as the mother once loved him (the boy). Or as Freud expresses it, the boy, withdrawing his love from the mother, identifies himself with her, and seeks a new love-object whom it will love as its mother once loved it.

The failure on the part of the analyst to bring to the consciousness of the patient the existence of the above-mentioned feminine attitude may be due to a lack of knowledge on the part of the former of the mechanism of its genesis. Or on account of his own resistances in respect to this feminine attitude, he fails to recognize positive evidences of its existence in the patient, or fails to take note of the existence of resistances in that direction. Often we see as evidence of resistance in respect to the feminine attitude, a more or less constant demand on the part of the patient that the analyst should take a more active rôle. Another evidence of this resistance is a frankly rebellious attitude on the part of the patient, due in a great measure to the (pre-conscious) effort to maintain the repression. Such patients in the unconscious are submissive, and have an unconscious impulse to surrender, to submit; thus assuming the unconsciously-determined feminine rôle. A situation such as this is likely to bring about in the analyst a great deal of anxiety as to the actual state of the patient, the outcome of the case, or as to what method the analyst should follow in such an acute situation. The difficulty in which the analyst finds himself is under such circumstances due in a great measure to his own feminine attitude; the threatening, hostile attitude of the patient causes anxiety in the analyst in so far as his own repressed feminine attitude is activated by the corresponding activity or hostility or threats of the patient. For, as you know, anxiety (I speak of course of pathological anxiety) is due to an inability on the part of the individual to find an adequate discharge for libidinous quantity; and that is what takes place in the situation above described.

In the foregoing only the most commonly met with situations likely to give rise to a counter-transference have been considered. True, in some respects the difficulty in the situation may be ascribed to faulty technique. But it was pointed out that the cause of the faulty technique lies frequently in the fact that the analyst, owing to his own resistances, has reacted to the unconsciously determined activities of the patient as if they were consciously determined, and taking place in the present; especially in the fact that the analyst misinterpreted the phenomena of the transference.



## MENTAL CONFLICTS AS THE CAUSE OF BAD SPELLING AND POOR WRITING

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The following study reports the case of a boy who was able to do fourth grade work in all subjects except spelling and writing. In regard to the former he was about a second grade pupil, while in regard to the latter, not much better than a first grade one.

This case might be taken as evidence of an awakening interest from a psychoanalytical point of view in the various failures of pupils in our public schools. Public school teachers, educational-psychologists, and educators in general have attempted for a long time to solve the mysteries of school failures, especially where the disturbing factors could not be blamed on lack of sufficient ability, but rarely have clinical psychologists and the psychoanalysts tried their hands at any diagnoses and corrections.

To a great many observant workers it is becoming clear that the "law of exercise" or the "law of use and disuse," which is forwarded as the most fundamental law of learning by the majority of psychologists, will either have to be extended, modified, or entirely set aside in order to account for certain kinds of learning and particular types of forgetting. In this case it will be seen that the patient was able to spell words, after certain inhibitory factors were removed, which had been to all intents and purposes forgotten. The return of the ability to spell these words was not due to any practice of the bonds involved for the patient was not told how to spell the words which he had apparently forgotten. The return of the ability was rather due to the withdrawal of certain forces operating that caused the words, which were related to the various conflicts, to be continually misspelled. Even Thorndike's addition, the "law of effect," is too confining, at least the way he advances it.

No new laws are going to be formulated in this paper, but as the reader progresses through the following case, possibly the shortcomings of the commonly accepted laws of learning will become evident, for it is plain that the "law of exercise" had ample opportunity to operate. If the "law of effect" can be extended to include

more than most educators who adopt this law are willing to admit, then to its functioning or malfunctioning might be attributed the condition of the patient's learning at the time of his admittance to the hospital. Whether this is done or not, such factors as the emotions, repressions, complexes, conflicts, and inhibitions will have to be taken into consideration if an adequate explanation of the causes and the removal of the abnormalities in learning is to be advanced.

*History.* This case is that of a lad of ten with a negative family history. His personal history will be greatly abbreviated as only a minor part of it bears on the facts to be noted.

The social service record states that the patient started to school at five and finished the fourth grade at ten. No grades were repeated. His school work has been average or better except in penmanship and spelling. In the latter his skill is about second grade in regard to certain words and about fourth grade if a great many other words are considered. In writing he hardly excels the first grade standard. He had been passed from grade to grade with the hope that his spelling and writing would improve. When he had completed the fourth grade and hadn't improved in these two subjects, the teachers were unwilling to let him go farther. From all reports the teachers were of the first rank, doing all in their power to help the boy. When other means failed he was turned over to a special teacher who had no better success with his apparent inability to spell and write than did the regular teachers.

This lad has always been a very sensitive and emotional character; presenting a picture of activity, energy, and vitality.

*Examination.* His physical condition was negative except for a slight undernourishment. According to the Stanford Revision of the Binet-Simon Test he had an intelligence quotient of 110.

On admission he appeared restless and very curious about everything, inquiring if the examiner were a professor of chemistry in the hospital. At that time it was impossible to determine where the curiosity in chemistry originated. He also manifested a keen interest in electrical equipment and apparatus, but again it was impossible at the time of admission to account for the interest in electricity.

As the teachers and mother had said, the boy's inability to spell certain comparatively simple words and his lack of coördination in handwriting were his outstanding abnormalities. Coupled with his poor handwriting was a peculiar phenomenon consisting of spelling a word one way orally and writing it another way. For instance he could spell "boy" orally but when he came to write the word he

spelled it "boye" or "wboy." On one particular occasion when he was doing this the teacher had him spell each letter as he wrote it and while he spelled "boy" orally, he wrote at the same time, "dog."

*Analysis.* At the first session the patient was given the following list of words: afraid, girl, boy, rough, fruit, heard, autumn, learn, dead, teacher, mamma, woman, father, daddy, before, whip, because, finger, cap, run, supper, man, come, dog, nose, spell, dream, peanut, leg, hip, rest, horse, some, big, wind, and start. He was required to write them as well as spell them orally. In all instances the oral agreed with the written spelling. Following are the words misspelled: afraid, girl, rough, fruit, heard, autumn, learn, dead, teacher, mamma, woman, whip, because, and finger. Just a glance at the misspelled words will indicate a preponderance of reference either directly or indirectly to sex with a large percentage referring to muliebrity. The patient was asked to spell "girl" every way that he considered might be correct and he gave these: "garl," "girle," "gerl," "gerle," "gearle," "gearl," "gairle," and "dirl." Almost as many ways were given for "mamma" and "teacher." "Finger" was spelled "funger." It was soon discovered that he disliked girls in general and especially his two and a half year old sister and his teachers.

Further analysis revealed an incest fixation, a sexual curiosity in the form of a strong desire to see the female genitalia, and a masturbation conflict, all of which were deeply suppressed and released only after several weeks of intensive work. When these conflicts were being dissolved some very beautiful abreactions were displayed, the explicitness of which one cannot appreciate without having observed them or similar ones. The incest fixation was very strongly repressed making itself felt in roundabout ways and finding indirect expression in the symptomatic acts of misspelling certain words such as mamma, sister, girl, etc. In other words, one of his symptoms was misspelling.

His sexual curiosity was, however, the most potent factor in the production of his symptoms. When about five years of age he was told by some older boys concerning the difference between the female and male genitals. This acquired information he shared with his mother who told him to immediately forget it, not to talk or think further of it. His curiosity to find out for himself was not thus easily set aside and for about a year he gave in to his desire to see by hanging around the girls, observing them when they sat or squatted. Soon a conflict began to be waged between his feeling of guilt on the one hand and his libidinous desires and wishes on the

other, with the result that he ceased to recognize any craving for sex knowledge. Directly he discovered that he was beginning to dislike the girls and the teacher without knowing exactly why, being suspicious, however, that they were in league against the boys and that the teacher was showing favoritism in behalf of the girls. This conflict continued for about three years with a compromise in the form of misspelling certain words agreed upon by the two opposing forces. One day during the course of analysis after his incest fixation and his sexual curiosity had been brought to the surface and thoroughly dissolved, he spontaneously spelled girl, mamma, and teacher. He took a paper and pencil, which were lying on the desk and wrote the three words down to see if they looked familiar. The lad was very joyous over the fact that he could now spell the words and that they appeared known and "friendly." It was established that he had been able once to spell these words and that his ability to spell them now was not due to relearning. Thus the only conclusion to draw is that they were simply released from the hold of his conflicts and allowed to appear as words in their usual relationships and not as standing for a thing with which he was in tremendous conflict. Now when asked to spell afraid and fruit he could do so correctly. At this point it might be mentioned that it is futile to maintain that all the words the patient was supposed to learn to spell and didn't should be released spontaneously and correctly spelled due to the dissolving of conflicts. Conflicts not only operate to misspell a word which at one time could have been spelled correctly but they also operate to keep from learning how to spell a word in the first place. Thus which misspelled words are due to distortion subsequent to learning and which ones are the result of factors operating to keep them from ever being learned is another problem. If time and interest warranted it, there is no doubt that it could be worked out.

At this time another list of words was given to the patient including snake, river, brook, serpent, and neck, which were misspelled. The boy was also unable to make the capital letters, P and Q. Here as before even superficial observation would lead one to suspect a sex conflict operating in the misspelling of these words and in the lad's inability to make the capital letters, P and Q. It was learned that the boy masturbated until about seven. He ceased after a tremendous effort and finally came to a point where he wouldn't admit that he even desired to masturbate. Soon after his ceasing of the habit he began to find annoyance in urinating. He wished that he

didn't have to do it and wondered why people were so constructed that it was necessary. Especially did he hate to urinate in a toilet. Also nocturnal enuresis caused considerable remorse and depression. In the working out of the masturbation conflict it was found that the patient used to practice the act often in toilets and when this was brought to light, the boy spontaneously offered the explanation of his dread of urinating in the toilets. After the conflict was completely dissolved, he did not experience disgust in urinating and remorse after wetting the bed.

At the close of one session near the end of the unraveling of the self-pollution conflict, the patient became able to spell snake, serpent, river, brook, and neck. It might be pertinent to add that at the beginning of this same session he was unable to spell these words. In the next session the boy obtained insight into his incoördinated handwriting as a masturbation substitute. The very fact that this insight followed the analysis of the conflict indicates that the conflict was the cause of his poor writing as well as the cause of the misspelling of certain words. To test the conclusion that the poor writing due to lack of coördination of the muscles involved in writing is a masturbation substitute, observation will have to be made on his progress in writing this coming school year.

Just before the patient was discharged he was given several hard words to learn to spell. He had no difficulty at all in learning to spell them. In addition he passed successfully the fourth grade in spelling as given by Lippincott's Horn-Ashbaugh Speller.

Before closing it might not be amiss to proffer an explanation in the light of what has gone before of the boy's interest in chemistry and electricity, which interest could not be accounted for at the time of admission of the patient as no direct experiential factors entered into the case at all.

It is well recognized by parents and teachers that the sexual curiosity of childhood makes much trouble. In its unsublimated form it presents the "peeping Toms" and draws down upon its possessor the severe punishment of society, but in its sublimated aspect, it is at the bottom of the impulse to investigate and experiment. In chemistry this lad found a field in which, to use his own language, "One could really find out something and see something new." What sublimated expression of the curiosity to see the female sex organ was given, was found in the form of an interest in chemistry and electricity. The boy had no sign of a chemical laboratory of his own; neither did he have any electrical apparatus. He had



visited a chemical laboratory in connection with a local hospital in company with one of the doctor's boys and soon became absorbed in the various solutions in test tubes. Ever since then he has talked chemistry and dreams about the time when he will become a great chemist. He had learned to spell chemistry, chemist, chemical, organic, liquid, and bubble.

*Summary.* This study reports the case of a ten-year-old-boy, normal physically and mentally, who, although doing fourth grade work in the majority of his subjects, could not spell a number of second grade words and could not equal the second grade writing standard. Analysis uncovered an incest fixation, a strong sexual curiosity, and a masturbation conflict. When these were dissolved, several indicative words, which were invariably misspelled at the beginning of the analysis, were spontaneously spelled correctly and insight was gained by the patient in regard to the nature of his poor handwriting, which was evidently a masturbation substitute. The boy began to be a poor speller and writer at the time that he refused to admit that he ever had strong libidinous desires and cravings and strong impulses to masturbate. Until six or seven what little spelling and writing he did were quite up to standard. He could at one time spell such words as mamma, teacher, girl, neck, snake, etc. During the period that he could spell these words he possessed a keen desire to see the female genital but didn't suppress it, actually gratifying the craving by spying on the girls. The desire to masturbate was also satisfied during this same period. Since about seven, when severe repressions began, the above-mentioned words became harder and harder to spell until finally he was unable to spell them at all. It has been during the last three years that the strongest conflicts have been waged and during this same period have his spelling and writing been the worst.

At the time of discharge the boy was well nourished, possibly slightly overweight and displayed an even, patient, happy, and contented disposition as contrasted with his previous irritable, depressive, and complaining character. He thought he could like his teachers and thoroughly enjoyed playing with the girls of the nearby hospital. There is every reason to believe that this lad should make an adequate adjustment to his school environment and become at least an average speller and writer.



## SLEEP AS AN ESCAPE MECHANISM

BY MALCOLM M. WILLEY

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The resort to suicide as a means of resolving a mental conflict and escaping from the obstacles presented by the world of reality has been quite adequately commented upon in various sources. That sleep may unconsciously be employed as a means of resolving a mental conflict also seems clear. In this respect sleep, under certain circumstances, may be considered as a form of temporary suicide. The following case of Theo L. lends interesting support to such an observation.

Theo L. is a young man of twenty-four. He was, at the time dealt with, a student in one of the large eastern city colleges. With an excellent family history and perfect health he aroused no suspicions that he was beset with mental disturbances of any kind. This was not known until he volunteered the information. He had always achieved enviable records in his classes, was an omnivorous reader and worker, and his teachers remarked especially upon his ability to do problems involving tremendous patience and laborious routine. This was true during the first years of his college life. In the spring of his senior year a marked change took place. His class work fell from the former high standards. It was then that he sought someone in whom he could confide.

The boy fully realized that he was losing his grip upon himself, and was glad to coöperate in every way in getting to the roots of his conflict. He spoke freely, and blockings were few. His first complaint was that he was no longer able to study without distraction. He had never been particularly bothered with phantasies, and day dreams had not hindered his ability to read with concentration of attention. But now this had changed. His mind wandered as he read. He would suddenly discover he had been over several pages, and yet could not recall a word upon them. His mind was filled with phantasies, largely of an erotic nature. These grew upon him, and prevented close attention to the work he was doing in some advanced classes. He also began to bite the inside of his mouth as he worked, and to prevent this began to chew gum excessively.

But the greatest difficulty was that he was troubled with excessive sleepiness. In class rooms his mind roamed as lectures were given, and he felt drowsy most of the time. He lived for hours each day in a semi-hypnagogic state. After lunch at noon he would feel himself forced to take naps, often of two hours' duration. Again at night he often was unable to stay awake beyond half past seven or eight. He would go to bed at that time and sleep until seven the next morning. His physical condition being good, and previously having gotten along with eight hours of sleep, he could not understand the change in his habits. Only something unusually diverting could stave off this sleepiness. A theater, a concert, or a discussion group, and the drowsiness seemed to disappear. But left alone with his studies, he invariably succumbed to the desire to go to bed and to sleep.

It took some questioning to get behind this. It developed that early in the spring of the year in question, Theo had for the first time become thoroughly in love. He had known girls, associated with them, enjoyed their company, and flirted mildly. But now he had met a girl upon whom he fixed his entire emotional life. His attentions were not rejected, but the girl looked upon him in no more than a friendly way. Theo confessed that it was after meeting this girl that his difficulty in studying began. It was of her that he thought as his mind wandered from the pages. He admitted that most of his day dreaming was erotic in nature, centering in intercourse with the girl. He also recounted how he would post himself at various points on the college campus so that he might catch glimpses of her as she went to and from her classes. Frequently he would walk past stores where he thought she might be doing errands in the hope of catching sight of her. Sometimes he did see her, but on these occasions never went into the store. On several occasions while out walking in the hope of seeing her, he did, but as she came towards him, he would turn into a side street so as to avoid an actual meeting. He once or twice passed her on the street and pretended not to notice or recognize her. As time went on he even became frightened at the thought of calling her on the telephone; yet at the same time would wander in the neighborhood of her home, hoping to catch a glimpse of her. This desire to be with the girl and to make himself attractive to her conflicted with a fear that he would fail to make a good impression (a groundless fear, as time showed) and rather than test himself out, he carefully avoided the meetings,

or when by chance they did meet, was so uncomfortable that he derived no pleasure.

Questioned further regarding his sleepiness, Theo admitted that on going to bed he always indulged in some day dreaming, and that he consciously tried to induce a state of being half asleep in which he might let his imaginings run free for a few minutes. But this was not why he went to bed, he explained. He went to bed because he could go to sleep, and wanted to. "Going to bed is the happiest hour of the day," he declared.

This story was brought out in several long talks. It was not so straightforward and logical as the summary indicates. It was clear that Theo himself did not realize wholly that his desire to be in bed and asleep was simply the desire to escape from his worries induced by the love affair, worries centering in his fear that he would not be able to command the affection of the girl. (He stated that he had sometimes thought of suicide.) In his early college days, Theo had seemingly been able to sublimate successfully; his ability to work intently on minute and monotonous problems set by his instructors indicates this. His energies got outlet in intellectual work. But the fixation upon the girl in the senior year changed matters, and the ensuing conflict developed. To escape this there was the unconscious induction of sleepiness; for in sleep Theo escaped from his tormenting thoughts.

When this was all made clear to him, and other phases of the problem explained, Theo's condition improved. The girl herself aided and Theo was made to understand that his attention would be acceptable. They soon became engaged. The phantasies no longer bothered. Theo is again able to pursue his studies which he is doing in the graduate school. No longer, either, is he troubled with sleepiness, and he is now able to study in the day time or the evening without the annoying wandering of the mind. The conflict having been resolved, and the love life adequately satisfied, he no longer falls back upon the sleep-state, which before had been to him, unconsciously, the one way of escaping from his mind torment.

## SPECIAL REVIEW

### PSYCHOLOGICAL TYPES \*

By WILLIAM A. WHITE

This book of Jung's has been in the process of becoming now for some time and those who are acquainted with the author's recent writings have been actively expectant of its appearance. Now it is here, not only in its original German but in an admirable English translation and at once it easily takes its place as one of the most important contributions to psychoanalytic literature provided psychoanalysis be understood in its literal, etymological sense rather than in the special sense to which it is restricted by the strictly Freudian.

This review might easily take the form of an essay on the whole story of Jung's connection with the psychoanalytic movement, the gradual growth of his ideas which led to his definite break with the original group, especially with the views of Freud, and the final working out of his own standpoint culminating, for the time being, in the present volume (we understand he is preparing a new work on mythology). This program, however, would involve much more than a review so it is thought best to stick to the orthodox procedure and therefore to the book in hand although its fuller understanding and appreciation at least from the psychoanalytic viewpoint, must be based upon such a historical survey. It will, however, be necessary to define, by considerable quotation, his basic concepts in order to make clear his description and interpretations of the types which it is the object of the book to explain.

Jung now, for some years, has been intrigued by the problem of psychological types and before the appearance of this book, had already contributed at least one publication to the subject. He had also been developing his energetic conception of the libido and his further concepts of the collective unconscious and the archetypes of apprehension.

In the first place one needs to understand that Jung had departed

\* *Psychological Types or the Psychology of Individuation*. By C. G. Jung. Translated by H. C. Baynes. Published by Harcourt, Brace & Co. Pp. 628 and index. New York and London, 1923.

from the Freudian concept of libido and although he still uses that term he uses it in the sense of psychic energy (p. 571) not as a specific psychic force but as a concept of intensity or value. In this sense he deals with it after the manner of the physicist assuming that differences of potential will create a tension in their tendency toward equilibrium. The differences of potential occur between the conscious and the unconscious for Jung regards "the relation of the unconscious to the conscious as compensatory" (p. 422).

At this point it becomes somewhat essential to have some idea of the make-up of the unconscious as Jung sees it. "The unconscious, regarded as the historical background of the psyche, contains in a concentrated form the entire succession of engrams (imprints), which from time immemorial have determined the psychic structure as it now exists" (p. 211). He would distinguish "a *personal* unconscious, which embraces all the acquisitions of the personal existence—hence the forgotten, the repressed, the subliminally perceived, thought and felt. But, in addition to these personal unconscious contents, there exist other contents which do not originate in personal acquisitions but in the inherited possibility of psychic functioning in general, viz., in the inherited brain structure. These are the mythological associations—those motives and images which can spring anew in every age and clime, without historical tradition or migration." He terms these contents the *collective unconscious* (pp. 615–16). "Since earliest times, the inborn manner of *acting* has been called *instinct*, and for this manner of psychic apprehension of the object" he proposes the term *archetype* "which term embraces the same idea as is contained in 'primordial image'" (pp. 475–6). "The inherited archetype survives all ages; it is a factor superordinated to every change upon the phenomenal plane, preceding and superseding all individual experience" (p. 395). "These archetypes, whose innermost nature is inaccessible to experience, represent the precipitate of psychic functioning of the whole ancestral line, *i.e.*, the heaped-up, or pooled, experiences of organic existence in general, a million times repeated, and condensed into types. Hence, in these archetypes all experiences are represented which since primeval time have happened on this planet. Their archetypal distinctness is the more marked, the more frequently and intensely they have been experienced. The archetype would be—to borrow from Kant—the noumenon of the image which intuition perceives and, in perceiving, creates" (pp. 507–8).

It is between the conscious and the unconscious for the historical

part of the psyche, both personal and racial, that the libido flows back and forth as the differences of potential constantly shift and in which state of disequilibrium the unconscious functions as compensatory. In this energetic interplay a blocking at the conscious level will cause a backing-up of energy which will flood unconscious territories and so will "furnish the libido-sum which activates the archaic imprint" (p. 296). Jung speaks of the image as archaic when it is "in striking unison with familiar mythological motives. In this case it expresses material primarily derived from the collective unconscious" (p. 555).

These quotations indicate how Jung thinks of the unconscious, of the nature of its content and of its function as compensatory. They also indicate the possible directions of libido flow within the psyche. But in addition to this intrapsychic occupation of the libido there is another, namely, its occupation and consequent flow as between the subject and object. As will be seen later, these two fields of libido activity are not independent of one another. Quite the contrary, they are not only mutually dependent but only different aspects of the great whole of libido functioning. It is particularly in this latter field of libido functioning, namely, in the relation between subject and object, that occur those primary differences of libido investment that determine the outstanding characteristics of the different psychological types that Jung describes and it is in the intrapsychic field where the compensatory investments occur that produce the secondary characteristics.

In the first place Jung differentiates two *general attitude types* which "are distinguished by the direction of general interest or libido movement" and certain special or, as he calls them, *function-types* "whose particularity is due to the fact that his most differentiated function plays the principal rôle in an individual's adaptation or orientation to life" (p. 412). The two general attitude types referred to are the extraverted and the introverted, which terms indicate the direction of the flow of the libido, namely, in the former "an outward movement of interest toward the object, and in the other a movement of interest away from the object, towards the subject and his own psychological processes" (p. 11). "But every individual possesses both mechanisms—extraversion as well as introversion, and only the relative predominance of the one or the other determines the type" (p. 10). These two types, dependent upon the opposed mechanisms of extraversion and introversion, have long been known; they presented to Goethe as embracing the principles



of diastole and systole. Jung has given them a biological meaning as representing two processes of adaptation. "Nature knows two fundamentally different ways of adaptation, which determine the further existence of the living organism; the one is by increased fertility, accompanied by a relatively small degree of defensive power and individual conservation; the other is by individual equipment of manifold means of self-protection coupled with a relatively insignificant fertility." These ways of adaptation are shown in the mechanism under consideration by "the peculiarity of the extravert, which constantly urges him to spend and propagate himself in every way," and "the tendency of the introvert to defend himself against external claims, to conserve himself from any expenditure of energy directly related to the object, thus consolidating for himself the most secure and impregnable position" (p. 414). William Blake saw the outstanding characteristics of these two types when he called them the "prolific" and the "devouring."

These, then, the extraverted and the introverted, are the two basic, the general attitude types. Aside from the fact that under unusual conditions of stress from without an individual may be pressed into an attitude that is not in fact their own, whereby a falsification of type takes place (p. 415) individuals can further be differentiated on the basis of individual basic psychological functions. These basic functions are *thinking, feeling, sensation and intuition* and we may therefore have thinking, feeling, sensation, and intuitive types respectively or what Jung designates as function-types. "Every one of these types can moreover be introverted or extraverted" (p. 14). Now an individual belongs to the type of his *superior function*. To this superior function other functions are auxiliary while functions of opposite sign compensate in the unconscious. On this basis of the complementary or antagonistic nature of the four basic functions a further differentiation is made associating the thinking and feeling functions as rational types and the sensation and intuitive functions as irrational types, both of which are either extraverted or introverted so that there are two extraverted and two introverted rational and irrational types, making in all eight function types. From the standpoint of the unconscious, assuming this classification is on the basis of the conscious functions, the opposite would prevail. The rational in the conscious would be compensated by a corresponding development of the irrational in the unconscious and *vice versa*.

This differentiation of the four basic functions into rational and

irrational is important as assisting in arriving at the formula of the personality both conscious and unconscious on the basis of the basic and auxiliary conscious functions and their corresponding unconscious compensatory functions of opposite sign. Thus one rational function may have one or both irrational functions as auxiliary but the other rational function must be antagonistic and correspondingly for the irrational functions. "Since it is a vital condition for the conscious adaptation-process that constantly clear and unambiguous aims should be in evidence, the presence of a second function of equivalent power is naturally forbidden. This other function, therefore, can have only a secondary importance, a fact which is also established empirically. Its secondary importance consists in the fact that, in a given case, it is not valid in its own right, as is the primary function, as an absolutely reliable and decisive factor, but comes into play more as an auxiliary or complementary function. Naturally only those functions can appear as auxiliary whose nature is not opposed to the leading function. For instance, feeling can never act as the second function by the side of thinking, because its nature stands in too strong a contrast to thinking. Thinking, if it is to be real thinking and true to its own principle, must scrupulously exclude feeling" (p. 514).

"Experience shows that the secondary function is always one whose nature is different from, though not antagonistic to, the leading function: thus, for example, thinking, as primary function, can readily pair with intuition as auxiliary, or indeed equally well with sensation, but, as already observed, never with feeling. Neither intuition nor sensation are antagonistic to thinking, *i.e.*, they have not to be unconditionally excluded, since they are not, like feeling, of similar nature, though of opposite purpose, to thinking—for as a judging function feeling successfully competes with thinking—but are functions of perception, affording welcome assistance to thought. As soon as they reached the same level of differentiation as thinking, they would cause a change of attitude, which would contradict the tendency of thinking. For they would convert the judging attitude into a perceiving one; whereupon the principle of rationality indispensable to thought would be suppressed in favor of the irrationality of mere perception. Hence the auxiliary function is possible and useful only in so far as it *serves* the leading function, without making any claim to the autonomy of its own principle" (p. 515).

The principal or directed function may, however, be developed

to such a degree as to throw the personality dangerously out of balance, beyond the point of effective compensation. "Man, doubtless, is capable of a very extensive reduction to the mechanical level, although never to the point of complete surrender, without suffering gravest injury. For the more he is identified with the one function, the more does its overcharge of libido withdraw libido from the other functions. For a long period, may be, they will endure even an extreme deprivation of libido, but in time they will inevitably react. The draining of libido involves their gradual relapse below the threshold of consciousness, their associative connection with consciousness gets loosened, until they sink by degrees into the unconscious. This is synonymous with a regressive development; namely, a recession of the relatively developed function to an infantile and eventually archaic level. But, since man has spent relatively only a few thousand years in a cultivated state, as opposed to many hundred thousand years in a state of savagery, the archaic function-ways are correspondingly extraordinarily vigorous and easily reanimated. Hence, when certain functions become disintegrated through deprivation of libido, their archaic foundations begin to operate in the unconscious.

"This condition involves a dissociation of the personality; for, the archaic functions having no direct relation with consciousness, no practicable bridges exist between the conscious and the unconscious. It follows, therefore, that the further self-divestiture goes, the further do the atonic functions decline towards the archaic. Therewith the importance of the unconscious also increases. It begins to provoke symptomatic disturbances of the directed function, thus producing that characteristic *circulus vitiosus*, which we encounter in so many neuroses: the patient seeks to compensate the unconsciously disturbing influence by means of special performances of the directed function; and so the chase continues, even, on occasion, to the point of nervous collapse.

"Conceivably, this possibility of self-divestiture through identification with the directed function depends not only upon a one-sided restriction to the one function, but also upon the fact that the nature of the directed function is a principle which actually demands self-divestiture. Thus every directed function demands the strict exclusion of everything not suited to its nature; thinking excludes every harassing feeling, just as feeling excludes each disturbing thought. Without the repression of everything that differs from itself, the

directed function cannot operate at all. But, on the other hand, the self-regulation of the living organism makes such a strong, natural demand for the harmonizing of human nature that the consideration of the less favored functions forces itself to the front as a necessity of life, and an unavoidable task in the education of the human race" (pp. 370-1).

These quotations give briefly the main principles as elucidated in this most stimulating contribution to dynamic psychology. The pith of the book is contained in Chapter X, General Description of the Types, which perhaps had it come first would have made much that is contained in the first nine chapters more easily understood. These nine chapters contain a critical discussion of the type problem as it has appeared in classical and medieval thought, in the discernment of human character, in poetry, psychiatry, esthetics, philosophy and biography and particularly as set forth and previously recognized and discussed by Schiller, Nietzsche, Furneaux, Jordan, Carl Spittler, and William James, and in psychiatry by Otto Gross. There is added in Chapter XI a series of definitions that will be found very helpful especially with reference to concepts which Jung has evolved himself or those of others which he uses in a special way.

The book as a whole constitutes one of the most valuable and stimulating contributions to psychological literature of recent years. It is a consistent attempt, not only to define certain psychological types, but to place psychology on an energy basis. The individual, for Jung, is no mere mosaic of static patterns, but the container of ceaselessly flowing energy as constantly created differences of potential seek equilibrium. This approach is of enormous importance from the point of view of the nature and relationships of psychology as a science, and of practical clinical value in assisting to better thought about psychopathological problems.

It could hardly be expected that in a closely written presentation of over six hundred papers which proposes to lay the foundation of psychology both normal and morbid and which incidentally also implies a philosophical attitude that the author should have failed to arouse the objections of a critical reader at many points. The reviewer is not unaware of the opportunities for criticism that the author has thus necessarily exposed himself to but is convinced that the main thesis of the book as he has attempted to put it forth in this review is of such outstanding importance that all such possibilities for criticism sink into relative insignificance. The main concept is the matter of real importance.

## ABSTRACTS

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ABSTRACTED BY CLARA WILLARD

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1. On the origin of the "apparatus" in schizophrenia. DR. VICTOR TAUSK.
2. Technical difficulties in an analysis of hysteria. DR. S. FERENCZI.

1. *On the origin of the "apparatus" in schizophrenia.*—In psycho-analytic literature this phase of schizophrenia has been treated only in a general way. The author therefore undertakes a thorough discussion of the subject. He brings forward only a single case, but one in which the "apparatus" presents signal peculiarities of construction, permitting illuminating inferences.

The influence which the "apparatus" in schizophrenia exercises upon patients is of various kinds; they may throw pictures like those of a magic lantern or cinematograph, these pictures being at times three dimensional, like the usual hallucinations; they may put thoughts into the mind, or prevent thinking; may cause motor or other somatic reactions, such as erections, pollutions (ascribed at times to suggestion or to streams of air, X-rays, etc.); they may cause sensations which have never before been experienced, which patients are unable to describe; they may cause processes in the body, such as skin eruptions, piles, etc.

The peculiarity of these symptoms is that patients sometimes complain of them without ascribing them to any external, persecutory cause. It therefore seems probable that the "apparatus" is a final form taken by regressive symptoms which began in simple changes of feeling. There are even cases constituting real transitions between these extremes. In some instances patients believe that they themselves cause the abnormal experiences and in these the author sees a parallel to that period of development where, in the process of choosing an object, the person projects his ego into the external world; the author adduces a schema showing seven stages in the delusional formation, corresponding to successive developmental levels.

The connection between the ideas and the "apparatus" having been

thus indicated, the author proceeds to consider the forms which the "apparatus" assumes. He omits the magic lantern as being of too rational construction to readily permit inferences as to the significance of the delusion. In general two facts are salient in connection with the "apparatus": (a) it is of obscure construction. Patients have difficulty in forming a clear idea of the parts and have an impression, like that in the dream, of feeling rather than of understanding the construction; (b) the "apparatus" is always a machine, and a complicated machine.

The psychoanalyst will not doubt for a moment the symbolic nature of this formation, and in this connection Freud recently gave utterance to a definite opinion. He states that all complex machines in dreams represent the genitals—a view confirmed by the author's own experiences, who goes even further, saying that these machines always represent the genitals of the person's self and are onanistic dreams—dreams of flight from onanism; the addition of successive parts represent successive measures taken to resist the masturbation wish. In illustration of this interpretation of the "apparatus" in schizophrenia, the author cites his case. The patient, Frl. Natalija, a student in philosophy, described the machine by which she was influenced as having the form of a human being. She believed that there were male machines of this sort for influencing females, and female ones for influencing males. At first her machine possessed genitals but later lost these organs. She could not recognize from the face, whom the machine resembled—a significant circumstance, for it is well known that in dreams unrecognizable persons always represent the dreamer. Here, then, instead of the genitals merely there is a whole person, mechanically constructed and representing the patient's self.

To further establish the analogy between the machine in the dream and the "apparatus" in schizophrenia the author calls attention to some of the features of schizophrenia. It may be called, he says, a disease entailing the loss of the boundaries of the ego. It is because of this confusion of the boundaries between the subjective and objective world that certain delusions arise, *e.g.*, that thoughts are placed in the mind, that the patient's thoughts are known to others, etc. There is a period in the early life of human beings entirely parallel to this, when they believe that those who take care of them control their thoughts and acts. Indeed, when the child first discovers that he can do something without the assistance of others he is filled with joyous astonishment. Tracing the process by which the barriers of the personality are constructed which make an indivisible psychic entity of consciousness, the author states that this independent existence may be considered to begin with the finding of the object in connection with the attainment of satisfaction for the appetites and cravings or with the failures to attain such satisfaction. Consciousness of self is a gradual realization that a world exists



which is in a high degree independent of the ego. Though Tausk is unable to convince himself that in this process the sexual tendencies play a greater part than the nutritional, he is of the opinion that they have a very specific and easily recognizable rôle therein. There is then, he says, a period when there is no sexual object for the individual, and at the same time no external world. At this time, too, there is no clear consciousness of subjective existence, but there are, nevertheless, wishes and cravings and expedients for satisfying them. Immediately preceding the discovery of the object there is a stage when tentatives are made in the direction of this discovery—a stage of the identification of the person's own body with the external world. It may therefore be assumed, the author states, that the projection of the patient's body in his case is a pathological regression to that psychic stage in which the infant proceeds to the discovery of its own body in making use of projection. Carrying the analogy a little further along the same lines he is of the opinion that, just as in normal development there is an original narcissistic libido-position which has to be given up under the influence of the instreaming external stimuli, so the pathological projection takes place because there is a regressive accumulation of narcissistic libido, or an unsurmountable fixation of the same. According to this assumption the projection of the patient's own body would be a defense against a complete return to a libido position corresponding to the foetal, and beginning of the extra-uterine, development. This viewpoint permits the explanation of various schizophrenic symptoms. For example catalepsy, *flexibilitas cerea*, etc., may be considered to correspond to those developmental stages in which the person does not yet realize that his organs are his own and is impelled to leave them to the power of foreign agents. In contrast to these conditions would be the symptom that the person's limbs are actually moved by outside forces. The catatonic condition would be the stage in which there is complete renunciation of the external world, corresponding to regression to the level of existence in the mother's body.

These regressions of the libido often extend to the period before there is centralization in the genitals, to the prenatal and early postnatal period when the whole body is diffusely libidinous. The author believes that when these facts are taken into consideration the apparent inconsistency between the dream, where the "machine" represents the genitals, and schizophrenia, where the "apparatus" represents the whole body, vanishes entirely. At the level of schizophrenic regression the sexual libido resides in the body as a whole, is diffuse, and belongs to various areas; in the language of later genital differentiation, the whole body is a genital.

2. *Technical difficulties in an analysis of hysteria*, together with observations on masked onanism and "intellectual equivalents" of onanism.—The experience of the author with one of his patients led him to the discovery of reasons for the failure of psychoanalysis in certain

cases of hysteria. The author's patient was a young woman with whom repeated attempts at psychoanalysis had proved unsuccessful, notwithstanding the utmost exertions on the part of the author and the apparent efforts of the patient to coöperate with him. He was able to bring the patient to a certain stage of recovery, but here met with difficulties he could not overcome—he could not make her understand the nature of transference as merely a temporary substitute in the direction of a healthy adjustment, and she continued to make fervid declarations of affection for the physician. The author noticed that when giving way to incessantly repeated phantasies showing her emotional attitude, she invariably assumed the same position on the sofa where she was accustomed to lie during the treatment. She held her limbs crossed in a manner suggesting the posture often taken by women in onanistic practices. The patient was wholly unconscious that she was attaining autoerotic satisfaction by this means, but when the author forbade her lying in this position she was thrown into an almost unbearable physical and psychic restlessness—convincing evidence of the suspicion that she had thus been finding an outlet for sexual emotion. Enlightened by this experience the author further discovered that the patient found other masked means for satisfaction. In the course of her daily employment of housewife and mother she had the habit, for example, of standing in such manner as to obtain a certain sexual gratification. When the author forbade these practices also the patient substituted certain "symptom acts." She developed habits of playfully pressing or pulling various parts of her body, which were obviously onanistic equivalents. The author was successful in making the patient understand the true significance of these symptoms, and by prohibiting all reactions of this nature, all masked onanistic practices, finally brought about a normal sexual adjustment to family life.

The author's experiences in this case led him to make a rule of never losing sight in psychoanalysis of the possibility of unconscious onanistic practices in which the entire sexual activity of the patient may possibly be absorbed. In this way he was able, in various subsequent cases, to overcome obstinate resistances to treatment. Patients sometimes objected "You tell me that onanism is harmless, yet you forbid it." Ferenczi's response was that masturbation was not prohibited because of its harmfulness generally considered, but because of the hindrances it offers to the psychoanalytic cure and however harmless the conscious form of onanism, accompanied by libidinous phantasies may be the unconscious or masked forms are always to be regarded as of pathological character, a fact which should always be made clear in the psychoanalysis. This can be done in no other way than by enjoining a temporary cessation of such habits, whereby the libidinous stimulus is diverted to a psychic path and thence to consciousness.

Referring generally to onanistic activities Ferenczi states that there

are many persons, not neurotic in other respects, who throughout their entire life are engaged in unconscious onanistic activities in which their sexual energies are dissipated. These seemingly harmless habits may lead to anxiety neuroses; a termination of symptomatic acts which are disguised masturbation equivalents is not infrequently a form of convulsive tics. Of these latter affections no psychoanalytic explanation, says the author, has hitherto been brought forward.

Ferenczi, in conclusion, calls attention to the fact that in the case here described, he abandoned the passive attitude usually recommended for the analyst, and that, instead of merely listening to the ideas and interpretations of the patient he took an active part in her efforts, imposing certain restrictions and enjoining a certain course of conduct. For this he finds a precedent in the "active technique" of Freud whose method it is, in anxiety cases, not merely to bring the critical situation to light, but to devise ways of abandoning the pathological position anchored in false foundations. Ferenczi compares his method in the case cited with the process followed in physiological experiments where blood pressure is increased in certain areas by placing arterial inhibitions at a distance therefrom. By a similar increase of energy through prohibition of its dissipation in libidinally charged acts the resistance of the censor is overcome and a normal adjustment is attained. "Experimental psychology" of this sort is well adapted to test the value of the Freudian theories, he asserts, indicating a way of measuring psychic quantities, in analogy to the manner in which other energies are measured.

(Vol. V, No. 2, 1919)

1. Methods of psychoanalytic therapy. SIGMUND FREUD.
2. On anal erotic traits of character. ERNEST JONES.
3. The phases of the act of consciousness of self. STEPHAN HOLLÓS.

1. *Methods of psychoanalytic therapy.*—This article is an address delivered at Buda Pesth in September, 1918, in which Freud gives a summary of the past successes, and a forecast of the future prospects, of psychoanalysis. Psychoanalysis, he says, has been successful in discovering the unconscious resistances at the root of the neuroses, in bringing these fully to consciousness, and, making use of the transference to the physician, in securing normal adjustments of neurotic conflicts. The name, psychoanalysis, was originally used because of the analogy of the process of separating the soul into its elements with the chemical process by which material substances are separated into their elements. In some quarters the success of this process has suggested the possibility of carrying the analogy still further, and the attempt has been made, after the

analysis, to build up the character in a manner which was supposed to resemble chemical synthesis. It has been claimed that this is the direction which the future development of psychoanalysis must take and the cry was raised that there could be too much analysis and not enough synthesis. Such attempts at synthesis, says Freud, are as senseless as would be the attempt to resurrect an animal organism after its destruction by vivisection.

The future advances of psychoanalysis must be made in an entirely different direction, he asserts—in the direction of "active therapy" referred to by Ferenczi in his article on the technical difficulties of an analysis of hysteria.

Freud indicates what may be understood by the term "active therapy." If the activity of the analyst results in making conscious what was repressed and in discovering the resistances, it has already been considerable. Further questions, nevertheless, arise: Shall the patient be left to battle alone with the resistances laid bare by the analysis? Should more specific aid be given him than is contained in the encouragement to get well and in the transference? Does it devolve upon the physician to help the patient to that psychic position which is the most favorable for accomplishing the desired result—the allaying of the conflict? If the patient's recovery depends on the solution of external difficulties is it the province of the physician to so far enter into the struggle as to adapt these circumstances to the patient's victory? Freud's answer is that activity in aid of the patient is beyond all doubt justified, and he adds that the fundamental principle which should here guide the physician is that the cure must be carried out as far as possible in abstinence on the part of the patient—not total abstinence from satisfaction, which would, perhaps, be impossible; not abstinence in the popular sense of sexual continence, but abstinence of a sort more intimately connected with the dynamics of the disease and more important for the cure. It was renunciation which give rise to the disorder and the symptoms are substitutes for satisfaction. For complete cure a very strong desire for cure is indispensable. It may be that, if the symptoms are too quickly ameliorated, this desire may be weakened. Here the physician should interfere to prevent a premature diminution of the suffering which is at the root of the wish to be restored to health and if the symptoms disappear too rapidly he should create unsatisfied wants in other directions which will give energy to the desire for complete health.

Danger of such premature amelioration of symptoms is threatened from two directions. The libido, in part set free by the analysis, may become engaged in devious substitute satisfactions, in activities which perhaps previously existed but which are now endowed with strong emotional energy. The patient constantly engaged in these diversions is no longer stimulated by the desire to get well. A half cured patient, for

example, may enter prematurely into relations with a woman who is not adapted to him, with the result that an unhappy marriage is contracted. It is the physician's duty to prevent such substitute adjustments, if possible.

It is harder for him to interfere in situations of the second class, namely, where the patient's desire for cure is weakened by reason of the transference to the physician. Such a transference is a real hindrance to the success of the therapy and should be avoided. Freud says that it has been his invariable custom to refuse to make of his patients close adherents and followers and to impose on them his ideals. This was one of the points which gave rise to the controversy between him and the Swiss school, and though at the time he had the impression that some of his friends, among them Jones, thought his refusal harsh and arbitrary, he is nevertheless convinced that he is in the right. He is also unable to accept the suggestion of Putnam that psychoanalysis might be offered to the patient as a philosophic viewpoint which would lend content and meaning to life and ennoble the character. An expedient of this sort, Freud asserts, is only force in disguised form.

Experience has particularly emphasized the necessity of adapting "activity" in the analysis to individual differences in the cases. The physician would have little success in overcoming phobias if he made no attempt to free the patients from their fears until they voluntarily gave them up as a result of the analysis. In this way he would never be able to bring the material into the analysis, the discovery of which is indispensable for the cure. Taking agoraphobia as an example, he states that the patient should be induced to go among people in the street—to actually strive against the fear and in the course of this effort the memories and ideas are revived which render the solution of the patient's problem possible. Passive waiting seems still less indicated in severe compulsion neuroses. The tendency of this disease is, in general, toward indefinite prolongation of the treatment, as it were toward "asymptotic" treatment; the analysis brings much to consciousness but fails in affecting changes. The proper technique is to make the desire for cure so strong that it becomes itself a compulsion, and then to oppose this compulsion to the pathological one.

The author offers these cases only as examples of the problems with which the analyst is at the present time confronted. In closing his address he expresses the hope that the use of psychotherapy may be extended in such manner that the mass of the people, among whom psychoneuroses are so prevalent, may be benefited thereby.

2. *On anal erotic traits of character.*—In this article, which appears in English in the *Journal of Abnormal Psychology*, Vol. XIII, and also in Jones' "Papers on Psychoanalysis," second edition, the author gives the following summary: At the root of the anal erotic processes is either



the tendency to "retain" or to "yield," and from each of these is derived a separate series of characteristics. Every hindrance offered to the tendency predominating in the personality is met with opposition leading to deeply stamped character traits in the form of obstinacy, irritability, self-will, and bad temper. Characteristics to which both fundamental tendencies contribute are tenacity, inadaptability, capacity of concentration, with strivings in the direction of thoroughness and perfection.

In the adult the character traits depend principally on the reciprocal relation of the individual attitudes toward the two fundamental phases and the degree in which the individual reacts to each in the process of development and sublimation. Sublimation may lead, on the one hand, to thrift, miserliness, the love of possessing and taking care of things, to a capacity for tenderness as long as the person loved is submissive; or, on the other, to productivity, prodigality, love of creation, an inclination to impose the person's own personality on everyone and everything, a liking for modeling and molding, a great pleasure in making presents. Reaction forms are orderliness, cleanliness, pedantry and disinclination to waste.

The final resultants in character are extremely manifold, because of the very complex relations of the anal erotic components among themselves and in combination with other factors. From this complex arises some of the most valuable as well as some of the most unfavorable qualities. Among the first may be included strong individuality, decision, determination, love of order, talent for organization and efficiency, dependability, esthetic refinement, and tenderness and tact in the affairs of the world.

To the latter belong the inability to be happy, irritability and ill-temper, hypochondria, miserliness, narrowness of soul, limited intellectual vision and wearying spiritual obtuseness, love of domination and stubbornness—all traits which render life in society very bitter and difficult for their unhappy possessor.

3. *The phases of the act of self consciousness.*—Consciousness, according to Freud's view, is an organ for the perception of objective stimuli and of a part of the processes of thought. There are, as it were, two surfaces, the one directed toward external things and the other toward the foreconscious. Hollós states that the question immediately arises: what is the relation in which these two processes stand to each other—are they successive, coexistent, or have they some other relation? By examining what takes place when interruptions of trains of thought occur, *e.g.*, when a train of inward thought is broken off by objective sense stimuli, which in turn give rise to new trains of association, the author deduces a law of alternating phases of inner and outer perception in which the single phases stand in inverse proportion to each other; the stronger the outer, the weaker the inner, and *vice versa*. The optimum of clearness of consciousness presupposes the highest capacity for ener-



gizing both of the perceptual surfaces. Further, when memories are revived in the foreconscious it is a member at the beginning and one at the end of the train of associations which is most easily seized; between these extremes there are elements which can only be revived with difficulty, if at all. Thus, beside the phase of inner and outer perception, there must be assumed a phase of diminishing consciousness, a sphere into which some of the foreconscious links gradually withdraw and come to form part of the unconscious. Indeed the unconscious phase of associations seems from this almost a regular and necessary result of the normal processes of perception.

The optimum of consciousness may be weakened in manifold ways. For instance the perception of external stimuli is rendered difficult when the backward running process of energizing association trains set in. The outer perception loses its quality of becoming conscious in proportion to the strength and duration of the retrogressive energy; the continuity of consciousness may, in this way, be interrupted and the consciousness of self entirely lost; for it is on the inflowing forces of the external world that the contrasting consciousness of self really depends. Though unconscious phases constantly occur under normal conditions they pass unnoticed because they are of but momentary duration and there seems to be no break, just as in a rapidly rotating surface a hole is unnoticed.

The external sense stimuli on the one hand, and the affects of pleasure and pain, on the other, prevent the retrogressive movement from going too far or lasting too long; affective cravings seek satisfaction in the motor paths and the idea of a goal given by the reality principle seeks actualization in the same manner so that there is a constant tendency to keep awake and not to get out of touch with the external stimuli. Associated with these processes is the regulative factor of the endopsychic censor whose constant effort it is to repress into the unconscious certain elements of the association trains and to uphold the idea of a purpose in keeping with the reality principle as offered by the foreconscious.

In the foreconscious two different energies constantly strive for dominance, the one tending toward reality, the other toward the unconscious pleasure principle,—that is toward the opposite poles of the psyche. The consciousness of self is an instrument reacting most delicately to every disturbance of equilibrium in the fluent relations existing between inner and outer perception. When the equilibrium is to any great degree destroyed in one direction, the idea of the real and actual is lost, the pleasure principle gains dominance. In measure with the seriousness of the disturbance of equilibrium the resulting state is more or less grave, from conscious phantasies or day dreams to extreme pathological regressive conditions, such as the stupor of katatonia or the deep depressions. When the equilibrium is disturbed in the other direction the result is mania.

To these conclusions the author was led, not by speculation or the principles of psychoanalysis, but through experiments made by him some years ago, on the psychical and psychiatric significance of eye motions. The perception of external stimuli is invariably accompanied by convergence and fixation. At the moment when attention is withdrawn from the object the convergence of the eye is relaxed and there is fixation at a more distant and vaguer point. Briefly stated while inward associations are in progress the eye is fixed on infinity. During the phase of perception of external stimuli it is fixed on the finite. The author finds evidence of this alternation of phases in other forms of behavior, in the manner of speaking, gestures, etc.

Hollós believes that by this view day dreams, dreams in sleep, slight repressions, and the most extreme pathological states are logically explained as arising from the same causes.

This view also sets forth the conditions which make it possible to get at the unconscious through psychoanalysis. A twofold task is imposed on the patient to be analyzed. On the one hand he must permit himself to be wholly carried away by the flow of his associations; on the other he must be conscious of his associations. But assuming that flashes from the unconscious, as it were scotomata, fall into consciousness in the hiatus between phases, those memory lapses and errors which become the material for the interpretation of the unconscious would find ample explanation, as being of the same nature as dreams and neurotic and psychotic symptoms.

The author has sought to make clear the fact that the foreconscious is constantly enriching the content of the unconscious and that during our waking hours regular unconscious phases occur in consciousness which pass unnoticed by us. The fact that there is this constant interchange of activity does not in the least affect the existence of the unconscious as the depository of archaic phantasies and phylogenetic material. The alternating energizing of the inner and outer fields, however, furnishes opportunity for influx into the unconscious of qualitative modifications conditioned by external experiences.

# International Journal of Psycho-Analysis

ABSTRACTED BY SMITH ELY JELLIFFE, M.D.

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1. Manifestations of the Female Castration Complex. KARL ABRAHAM.
2. Pleasure in Sleep and Disturbed Capacity for Sleep. M. J. EISLER.
3. Communications: A Few Don'ts for Beginners, E. M. COLE; A Symbolism of Appendicitis, W. H. B. STODDART; A Simple Lapsus Linguae, CHAS. DALY; The Unconscious Root of Aesthetic Taste, S. HERBERT; A Spermatozoa Phantasy of an Epileptic, F. P. MULLER.

1. *The Female Castration Complex.*—The psychological phenomena which we ascribe to the so-called castration complex of the female are so numerous and multiform that even a detailed description can not do full justice to them. These questions are made still more complicated by their relations to biological and to physiological processes. This present study, the author tells us, does not pretend to cover the entire field. He would limit his discussion to a psychological consideration of clinical material.

Many women, he says, suffer temporarily or continuously during childhood or later from the fact that they were born female. The wish to be male constantly appears in dreams and in neurotic symptoms and appears so often as to warrant the generalization of its universality. This wish often is conscious but not infrequently it remains unperceived. The explanations so frequently given for this desire to be a male are usually rationalizations. Thus the real underlying motives are concealed. The inability to repress with sublimation the feeling of being at a disadvantage with the boy by the poverty of the external genitals therefore gives rise to strong charges of libido which must find some expression. Out of this there arises a typical castration complex in which the female genital is treated as a wound. This wounding is often projected towards the male as its author, hence the frequent impulse to castrate the male.

With the discovery of the male genitals the girl's narcissism is injured. In this period every child holds to its own place and covets what others have. Envy arises and is made up of two components at least; a hostile feeling towards the possessor, and an impulse to rob it of its possessions. This is a primary phase of a sadistic anal erotism. The child is often told it will have what it envies when it grows up, but a phallus of her own she can never have promised her; she must later reconcile herself to the fact of her physical "defect," and to her female

sexual rôle. If she can gain pleasure from her genitals in this early stage the renunciation is apparently easier. Barring this autoerotic manifestation the adjustment is not so simple. Abraham sketches the pathway it frequently takes through the initial association between defecation and the child's notion of it as a gift of parts of its own body: Movements-gift-penis and to this the idea of procreation, the child, is often added. Furthermore, the complex is again influenced by menstruation and defloration (wounds). From these many-sided determinations it is recognizable why traces of the castration complex should be quite universal in women. Often seen in mild degrees, at times marked pathological expressions are observed. To these latter the author would devote some attention.

In doing so he first calls attention to Freud's analysis of the "Taboo of Virginity." Defloration must first be carried out by the priest, a displacement to avoid the ambivalent hatred towards the husband who might have deflowered her. This reaction (varying in degree) in human marriage relations is well known to any real observer. Abraham gives some examples. Psychoanalysis shows that the reaction has a legitimate placing in the evolution of the marriage relation. Although the retaliation is referred to the acute event of defloration, it is referred back to the injustice suffered at the hands of the father in not having given the gift of gifts, the penis. She acts aggressively towards the husband (strangling, etc.) in revenge for the father's omission. A group of women are unable to break through the repression in this "archaic" sense. They advance only as far as the homosexual phase. They adopt the male rôle with other women. Professional careers, intellectual occupations, male characteristics, attitudes, etc., may reflect in minor degrees this same homosexual component in its masculine accentuation. In the women's movement of to-day this type of expression is quite apparent.

The neurotic transformations of the castration complex in women the author divides into two groups. In the one there is a strong emotionally toned, but not conscious desire to adopt the male rôle, *i.e.*, on the basis of the phantasy of possessing a male organ. In the second group the phenomena expressed show the rejection of the female rôle and the repressed desire for revenge of the favored male sex. Intermediary forms are so frequent as to forbid making a formal classification. The types mentioned represent only the ambivalent possibilities of expression of the phenomena.

Thus the "wish fulfilling" and "revenge" types may be so labeled in accordance with the relative preponderance of the underlying mixed mechanisms. These appear chiefly in the aggressive homosexual and revenge types. Their negative, repressed, ambivalents are also to be found, but more subtly disguised. The mechanisms of "wish fulfillment" type are seen in neurotic phantasies of the possession of a penis,

being a female napoleon ("Winnie and the Wolves" of the *Saturday Evening Post*. Abstract as reference) and very frequently in the dream life of the female. Abraham gives some examples. The author states that enuresis nocturna, among other determiners, has this castration complex. Women with this symptom often resist the acceptance of the female functions. This is also manifested in the "wetting" of the man during intercourse, especially when they take the male position.

Other parts of the body, by displacement, take on the erotic stimulus. The nose swells, the eyes become congested. The idea of the "fixed stare" has in many instances the connotation of an erection. (One patient seen by the abstracter, in his opinion, developed a "progressive myopia" as a resultant of this homosexual, sadistic—"I want to be a man and have a penis"—mechanism.) Abraham makes a pertinent comment on a related phenomenon (p. 14) and further (p. 15) states that a great multiplicity of symptoms may be referred to this group. [Not the least insignificant of these are the anal erotic "enema-taking" ceremonials of both orthodox medical practice and the "Oom Paul" devotees. See Berkeley Owen's paper on the "Anal Erotic in the Hindu Religions"—previously abstracted.] The author calls attention to the "my child" attitude of many women. "They can do it alone." "Immaculate conception" is the "archaic" component. The "anal erotism" is here well exemplified, and *extreme* "obstinacy" is a well known part of the character make-up of such individuals. Self-overestimation is a very striking feature in their expressionism.

The author now turns to the "revenge" type. Two tendencies are here observable, even though repressed. These are the longings for revenge on the man, and to take, even by force, his penis from him. *Vaginismus* is one of the forms (the most important, practically) in which this shows itself. "You can't come in," "I take it away from you" in this mechanism. (This has been a frequent mechanism in the author's experience. It is often shown in subtle form in virginal old maids, servants, behind the symptomatic act of hiding all forms of receivers, ash trays, etc.) Kleptomania in some of its forms has this determiner. (In the same form, such servants, *lose things*, put them in *out of the way places* where their mistresses can not find them; they steal from their mistresses, in *unconscious phantasy*, the "unconsciously" *longed for penis of the husband*.) Abraham shows very pertinently how, in dreams, the castration wish shows itself in "being run over," "losing a leg," "an arm," etc. Anxiety ideas about similar deprivations often have a similar motivation. Certain women are attracted to *maimed individuals* from a related motivation. The *mutilated man* has a special attraction because he has lost what the woman symbolically envies, i.e., a "penis," "a leg," "an arm," "a finger," "blindness" (the Enchanted Cottage), etc. The attraction of some gentile women for the Jew (circumcised) or other

"inferior" can be hereby understood. A further motivation for some cases of "frigidity" on the part of the female, as a piece of unconscious tactics, is elucidated by the author. (1) I rob you of what you lack because I lack it. (2) I rob you of nothing; I even promise you what I have to give. (3) I do not give you what I have promised.

Here the unconscious motive to dominate, by disappointing the male partner, is manifest. The male, by his "precipitate ejaculation" is the ambivalent analogue of the "female's frigidity."

The frigid woman (relatively expressed) is a widespread expression. *Actual* anesthesia (denial) is rare, but relative disinterest is frequent. Contact is perceived, but its pleasurable connotation—arrival at orgasm—is absent. The normal positive reaction to the male activity, as an absolute affirmation, is lacking. They immediately turn, after a very brief affirmation, to a complete negation of the entire procedure. Only with conception is a positive yes to the act given. The child is the "gift," i.e., the granting of the denied organ, i.e., the penis. The wound is now healed. The child is the recompense. The negative form is revealed in the nonconceiving female. They remain male. They will not (unconsciously) be female and have children. The man must be humiliated. They will not have children. Abraham gives an example (paralleled by many analytical experiences) wherein the woman, forced by a quarrel with the male to give in, foregoes her frigidity, and reveals the conscious and unconscious prostitution of the woman. Frigidity is a necessary condition of the prostitute behavior. The male, as well as the female Don Juan, must constantly change the love object. The male avenges himself, on all women, for his primary disappointment, and the female avenges herself on every man for the gift she had expected from her father and did not receive. "Her frigidity signifies a humiliation of all men and therefore a mass castration in the sense of her unconscious; her whole life is given up to this tendency."

The author next develops the theme that the frigid woman unconsciously strives to diminish the importance of that part of the body denied her, there is another form of refusal of the man which strives for the same aim with the opposite means. In this form of refusal, the man is nothing else than a sex organ and therefore consists only of coarse sensations. The man is an inferior being on account of his possession of a penis. This is at the same time overestimated and depreciated. This depreciation of the male organ signifies a progressive sexual regression and means the humiliation of the male as a whole. Thus certain neurotic women instinctively avoid the really masculine male. They seek the passive and effeminate male and by living with them daily renew their proof of their superiority. They will not accept the help of the male.

A still greater, or extreme form of sensitiveness relative to the castration complex is seen in certain cases of psychical depression in the female



sex. These women say they are useless. Man is so superior, women are of no value in the world. All situations in life, spring, flowers, fruit, birth, children, these are hated, or disgusting. Winter, snow, coldness, death, these are the only valuable things in life. All, or any, wounds, accidents, sicknesses, operations, etc., etc., are unbearable. Such things make "cripples"; such are unconscious reminders of "castration."

Finally the author deals with the "compromise formations." "If I were 'this' or 'that'; the most beautiful woman," then I could show the man, the world; then I could give them the merry Ha-Ha; "turn the cold shoulder." This is the sublime expression of the castration phantasy. The extreme female situation is rarely seen, but lesser degrees are frequent. "I will keep him guessing" is the most frequent form of compromise. Among the more striking but by no means frequent, statistically speaking, expressions of the castration phantasy, are the displacements of the complex to the children. Such females seek to influence their daughters by disparaging either the female sexual activities, or by giving them the feelings of aversion to men. They thus seek to undermine the more normal heterosexual trends in their own daughters. They emphasize in various ways, the disgusting features of relations to men. They not only seek to poison the daughters but also their sons. They seek to displace the erogenous interests of their boys from the genital to the anal regions. They fondle their buttocks, spank their behinds, even kiss them, unconsciously, to depreciate the value of the supremacy of the genital zones; they seek to make their boys sodomists, and, in the carrying out of their own revenge motives to the husbands (males) make women of their sons. That such hateful activities are possible seems odious to the average individual, but that such are possible evolutions of the castration complex in women psychoanalytic investigation shows are not only possible but by no means infrequent.

2. *Pleasure in Sleep and Disturbed Capacity to Sleep.*—A hidden and unconfessed perplexity is everywhere discernible when one would attempt to discuss the problems of sleep. Descriptively we have much, dynamically little. When psychoanalysis would turn to the problem, for it is particularly interested in certain phases of the sleep phenomenon, its explanations as yet are very tentative. The author first quotes Ferenczi's abstraction that the sleep of the new born babe is an hallucinatory effort to get back to where it came from. Freud has elaborated the conception. Sleep is a somatic reactivation of the sojourn in the womb. All libido is drawn into the ego. Libido and ego interests dwell together in their primal state. Eisler says he will not go further, believing that Freud's statement is quite adequate.

His own contribution would limit itself to clinical experience which he says tends to corroborate Freud's speculation. In the early gratification

of oral eroticism, whether with or without food, sleep states are engendered. This organization of the two states may show in pathological intensity. The author's first case was of a bright vivacious girl of eighteen who developed an acute neurosis after going on an excursion. At the prospect of going into company she would have spasms of the throat. This difficulty she hid from observation as far as possible. Later she conceived the idea she would not marry. She partly rationalized this behind the idea that due to her father's influential position and means the husband would be more attracted to these than to herself. She finally elaborated a small ceremonial when it was imperative for her to attend a gathering. She would unobserved swallow a small piece of dry bread. This was not always successful. This conversion symptom had a wealth of affect in analysis—as is usual (Eisler states in monosymptomatic hysterias). The malady had its initiation in a "prophecy." Her aunt caught her at onanism when a little girl and censured her for it. "If you do this again you will get sick when you are a big girl." She became a big girl when her sister married. The aunt was right—should not marry like her sister. The analysis also revealed the castration threat with a repressed masculine complex. The masturbation had continued and homoerotic experience with a governess had followed. She had shared vicariously excitement of a long betrothal of a cousin. At the cousin's marriage the repression of all of this material broke through and was determined as to its localization by the oral erotic libido. With the regression to the oral erotic phase, a remarkable sleep behavior developed. She had always been a great sleeper, and now began to enjoy it in a symptomatic form. First she must lie flat on her stomach all covered up as a preliminary. She would then automatically carry out one of these sleep activities: She would slip off her nightdress; she would get out of bed and urinate without waking and she would drink a glass of water without knocking it or spilling it. The author now allies these sleep activities to Freud's regression to the womb abstraction. She undresses, *i.e.*, is naked, she urinates in the amniotic fluid, she swallows as in the uterus. Eisler then assumes a preoral erotic phase, the lethargic or apnomic; the oral erotic phase is a subsequent emergent. This patient in her neurosis, regressed to the oral phase, in her sleep ritual to the apnomic phase. The "40" day sleepers—Charcot's hysterical sleep illness, show this latter phase in its purest form.

A second case of an amazing disturbance of the ability to sleep which contributed to a fatal result is further contributed by the author. She was not analyzed but he had known her closely for fifteen years. Neurotic difficulties in her education were present in childhood. Autoerotic tendencies were marked in the latent period. Infantile aggressive tendencies were evident in her precocity and when grown up she was excessively

courted and was almost helpless against praise. She was therefore supposed to be very sensual and in need of watching, but in reality she was quite circumspect. She loved to be in the limelight, talked about her activities. When married she was frigid. She was fond of her husband but averse to intercourse. She became restless, hypochondriacal and anxious. Frequent indispositions was her revenge mechanism to the husband for her disappointment. Pregnancy seemed a way out. She was quite interested but developed new symptoms. Nausea now was added as an increase of the cohabitation repugnance, and the unconscious revenge motive took the feelings of hostile thoughts regarding the child and the outbreak of an acute illness. The foetus died following her great anxiety and despondency. Delay in removing the placenta brought about hemolytic icterus and following the operation a complete loss of psychical resistance. Items were neurotically dealt with. Gynecological examination almost threw her into a delirium. Careful diet needs caused loss of appetite. Vomiting would overcome successful attempts at feeding. Excessive uterine hemorrhages now developed as a further expression of the anxiety regarding cohabitation. The vomiting, the tension and the exhaustion did not permit the bleeding to stop. Complete insomnia as a resistance to regression to her oral eroticism, now became an alarming condition. In a state of cloudy consciousness she suicided by burning.

The author reconstructs the whole story in terms of the organization phases of the oral eroticism. The more active an individual has been in his oral phase, and the more energetically this stage of development has been later repressed, the greater is the chance that his ability to sleep will be affected by a pathological regression of the libido. The oral libido requires a high counter-charge which is in certain circumstances apt to remove the general wish-to-sleep of the ego (drawing in of the libido). Abraham's study of the oral-eroticism tends to support the author's conceptions. Eisler gives further illustrative material in which the oral organization played a determining rôle in the sleep disturbance. He closes with some striking comments on the relation of breathing to consciousness, and the great importance of this lethargic—or apnoid phase of pregenital, pre-oral eroticism.

*Some Don'ts for Beginners in the Technique of Psychoanalysis.*

1. Don't fail to notice the entry of the patient into the consulting room, regarding punctuality, facial expression, tone of voice, manner and general appearance. Extreme neatness or untidiness of the person or self-admiration are points of practical value.
2. Don't allow the patient to sit in an upright chair. Provide a couch to encourage relaxation.
3. Don't sit within the patient's view. The analyst should be obliterated from view both literally and mentally.

4. Don't talk once the patient has taken up the supine position. Keep silent and let the patient break the silence at the beginning of every hour.

5. Don't fail to note the first remark. This will probably be found to have a bearing on the analysis and may act as a key to it.

6. Don't allow the patient to leave the couch or change the supine position so that the analyst is in view. The desire of the patient to view the analyst is to watch the effect of his disclosures on the analyst's face. If the patient insists on turning towards the analyst, this resistance should be analyzed at once.

7. Don't give your point of view to the patient. Take the patient's standpoint and work from that.

8. Don't argue with a patient. It takes two to make an argument and the analyst would be infringing the passive rôle. The patient grows tired of trying to argue if there is no response.

9. Don't forget to note the nature of the transference. A heavy positive transference in the early stages should cause the analyst to be on the alert for just as heavy a negative.

10. Don't fail to note signs of a counter transference. These will be found in the analyst's dreams and should be dealt with immediately. A counter transference means the need for further analysis for the analyst. "The analyst can proceed in an analysis only so far as he is analysed himself." (Freud.)

11. Don't administer cut and dried philosophy. That mode of procedure is suggestion and not psychoanalysis.

12. Don't divulge any personal affairs to the patient. The instinct of curiosity in the patient is always uppermost regarding the analyst. Don't be tempted to relate incidents in one's life to help the patient. He will probably use such communications for his own unconscious purposes during the analysis.

13. Don't fail to note the unconscious actions of the patient.

14. Don't fail to note the reactions of the patient, *e.g.*, angry voice, hushed tone, emphasis, tears, excitement, etc.

15. Don't draw the attention of the patient to the findings in the analysis too early in the work. The transference may be incomplete and the egoism of the patient will resent these disclosures. A serious reaction, such as the contemplation of suicide, may be the result. Don't forget that the neurotic's chief dictum is: "I am not as other men are."

16. Don't touch the patient. The patient may complain of all manner of symptoms during the analysis, some of which might involve a physical examination. They should have attention from a general physician and not from the analyst; *e.g.*, the development of a skin rash may cover a desire to expose the person to the analyst.

17. Don't continue the analysis after the time has expired even if

the patient has arrived late. Cease and rise from your chair no matter what the patient happens to be saying at the moment.

18. Don't allow patients who come for analysis to meet either on entry or departure. This is a frequent cause of jealousy and fresh resistances are set up.

19. Don't fail to note the manner of the patient's departure. Heed the facial expression and the tone of voice.

20. Don't forget that some unconscious action or unguarded remark on departure may furnish material for the next analysis.

STODDART, W. H. B., speaks of an appendicitis symbolism of unconscious homosexual significance. The grape seed-semen-impregnate him.

*A Simple Lapses Linguae.*—"We had been dining, five men and one lady. After dinner there was no means of the lady relieving herself; so she had to wait till late in the night, which must have been particularly trying, as we were all drinking freely, in a dry heat of 115 degrees.

"After dinner on the way home, the lady was talking about medicines and remarked: 'I have some excellent pills. They are made of Charcoal, Bepsin and Pissmuth.' Having said this she laughed hysterically, and I laughed outright, which put her at her ease.

"However, the next day she very cleverly brought the conversation round to slips of the tongue, and then said: 'Oh! Wasn't it strange? Last night I said "Bepsin" instead of "Pepsin" to Major Daly.'

HERBERT, S., deals with unconscious roots of esthetic tastes. Analysis showed: (1) violent dislike of yellow equalled coprophilic repression, nervous diarrhea was the obvious mechanism; (2) excessive love of yellow equalled a strong mother fixation in a homosexual—her hair was yellow. Pederastic phantasies also were thus determined; (3) Dislike of red and purple showed itself to be a "voyeur's" repression of his vulva peeping interest; (4) "liking stone quarries" a male homosexual regards as manly, and naked equals a "naked youth"; (5) interest in "wheel" patterns showed associations, notes, many coats of arms, three legs in a circle kicking, Italy kicking Sicily, flagellation and the excitement of a childhood flogging scene as the earlier determiner.

MULLER, F. P., details a spermatozoa phantasy in an epileptic. Silberer first called attention to spermatozoa dreams and death wishes. Schulze later confirmed these with the rebirth phantasy behind the death wish. The author reports an interesting case in which the phantasy of being a spermatozoa in the father's body was coupled with thoughts of death and rebirth. The patient was an epileptic not being treated by psychoanalysis and not knowing anything of the subject. On recovering from a prolonged postepileptic dreamy delusional state with occupation and

alcoholic features he spontaneously said "Just think of it. I have been in my father's bowels as a little seed, as phlegm. The door opened and the last to come out was Fritz (himself)." This was later inquired into and a full delirium experience reconstructed.

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1. WESTERMAN-HOLSTIJN, J. Analysis of patient with Cramp of the Spinal Accessory.
2. STRACHEY, A. S. Analysis of a Dream of Doubt and Conflict.
3. FERENCZI, S. The Symbolism of the Bridge.
4. PFISTER, O. Plato, A Forerunner of Psychoanalysis.
5. Communications: PFEIFER, S., Disappointment in Love During Analysis; RÖHEIM, G., Psycho-analysis and the Folk-Tale; HERBERT, S., A Child's Birth-Myth Story.
6. Collective Review: Róheim, G., Ethnology and Folk-Psychology.

1. WESTERMAN-HOLSTIJN, J.: *Analysis of Torticollis*.—A baker's assistant, forty-three years of age, has had since the age of forty a spasmodic torticollis. It did not seriously incommode him at first but by reason of emotional experiences had been getting so that he had an almost continued tonic cramp of the spinal accessory muscles. It ceased during sleep. Para-tics (Meige), smelling thumbs, holding hand to eyes, lifting lapels of coat, also were present, and some could be substituted for the torticollis. They finally interfered with his pushing the baker's cart. During his treatment other symptoms became manifest. He had been impotent a year; he could not go out, and smoking a cigar started the tics.

Dream analyses now follow. The first available one was one he had when he was about twelve years old. "*I fell into a hole and sank very far down; the longer it lasted the deeper I fell. At the end I screamed aloud and then woke up.*" All of the free associations are given. They come to show that the "fear is the same, whether I fall into the hole, or go to my wife." The idea that his wife might die arose from the symbol of coitus and the parent constellation was soon evident. The hole was his mother's grave. It soon came out that in his coitus with his wife, the mother was the phantasy object. His dread during coitus was the fear of incest—the same fear as expressed in the twelve-year-old dream. A sister fixation soon showed. When he was five and she was seven she forced him to coitus experiments. He later produced too many dreams, having first said he never dreamed (resistance) and later his family complexes appeared, those of the six-year-old brother relationship soon appearing as significant. His brother and sister were also intimate. His dream associations soon brought the brother into phantasy relations with



the wife and as a father substitute as a punisher of his incestuous phantasies to mother and sister. His brother was ambivalently his model. A later dream brought up repressed homosexual situations—"an old man had looked at him with a telescope while bathing: he feared he would attack him." Mutual onanism at the age of thirteen. Then he recalled his brother forcing him to masturbate him when he was four years old and taking a pseudo-coitus position in the activity.

In searching for determiners of the neck-turning it was seen that these came from interruption while with his wife in coitus. In his earlier sister relations he thought another sister was coming into the room and he suddenly turned his head to see. This became a not unusual action. He would turn—listen, and this interrupted the coitus. This brought up the idea of his turning to see if his brother was coming when he was playing with his sister. Then this sister was equated with the brother. She was a dominating figure in the household. She had a severe rectal trouble and once caught him masturbating and represented the repressed religious element in the family. The following determiners for the tic were therefore found: (1) Reproductions of the situations above described, therefore dread of the punisher of incest. (2) Homosexual desires which he had for his father, brother and sister, who make him look the wrong way round and prevented heterosexual actions. (3) Onanism equivalent. The tic had begun to be severe after he had given up onanism (for reasons to be dealt with presently) and had become impotent. The head and neck were penis symbols for him. His libido had, so to speak, turned from the genitals to his head and neck. (4) Self-punishment. This very masochistic patient punished himself with this illness for his infantile as well as for later sexual sins. (He "gave himself one in the neck" was his usual expression.)

The author then reconstructs the whole neurosis in detail which should be read in the original. The therapeutic results were quite satisfactory.

2. STRACHEY, A. S.: *Analysis of a Dream of Doubt and Conflict*.—This is a detailed presentation of three dreams which would have to be cited verbatim to be understandable. The whole presentation is ingenious and stimulating.

3. FERENCZI, S.: *The Symbolism of the Bridge*.—This is a fascinating contribution to the large and important subject of symbolism and its relation to unconscious phantasy. "Dream interpretation and analysis of neuroses remain the most trustworthy foundation of every kind of symbolism, because in them we can observe *in anima vili* the motivation, and further the whole genesis, of mental structures of this kind." Certainty regarding symbolic relations can only be attained in psychoanalysis. In other fields, myths, fairy tales, folk-lore, etc., such security may be problematical, but in analysis security seems to be three-dimensional. Bridges often play a striking part in dreams. When definite

historical associations are lacking a typical symbolic significance of bridges is often sought for. The author speaks of its appearance in a whole series of cases and offers some pertinent ideas concerning the interpretation. "The bridge is the male organ, and in particular the powerful organ of the father, which unites two landscapes (the two parents in the giant shapes in which they appear to the infant view). This bridge spans a wide and perilous stream, from which all life takes its origin, into which man longs all his life to return, and to which the adult does periodically return, though only by proxy, through a portion of himself." The dreamer—Ferenczi here speaks only of the male—is without exception suffering from sexual impotence (a safe bet), and makes use of this genital weakness to protect himself from the dangerous proximity of women."

The verification of his views he obtains from an analysis of a patient suffering from a bridge anxiety and retarded ejaculations. The patient could not cross a bridge alone, and in the course of the analysis when a strong transference had been established, he clung to the analyst like a vise until they had crossed the middle when he became cheerful and his anxiety vanished. He was afraid of the woman's genitals; he could not completely surrender. The bridge has two meanings; uniting member between the parents, and links, between "life and not life." These supplement each other. The father's organ is actually the bridge which expedited the unborn (the not yet born) into life. When *historical* dream material is obtainable, it is important to remember, says Ferenczi, that there may be no symbolic significance.

In a postscript to this communication the author touches on the possible meaning of bridge symbolism and the Don Juan legend. Here he writes he has tried to show the numerous layers of meaning which the bridge has attained in the unconscious. Here the bridge is (1) the male member which unites the parents during intercourse, and to which the child must cling if it is not to perish in the "deep water" across which the bridge is thrown. (2) In so far as it is thanks to the male member that we have come into the world at all out of that water the bridge is an important vehicle between the Beyond (the condition of the unborn, the womb) and the Here (life). (3) Since man is not able to imagine death, the Beyond *after* life, except in the image of the past, consequently as a return to the womb, to water, to Mother Earth, the bridge is also the symbol of the pathway to death. (4) Finally the bridge may be used as a formal representation of "transitions," "changes of condition" in general. In the original Don Juan legend the motives 1-3 are closely related and are confirmation of the interpretation. "According to the legend the famous woman-killer Miguel Monara Vicentello de Leco (Don Juan) *lighted his cigar with the devil's cigar across the Guadalquivir*. Once he met his own funeral and wanted to be buried in the crypt of a

chapel built by himself in order to be trodden on by the feet of men. Only after the 'burial' did he change and become a repentent sinner.

"(a) I wish to interpret the cigar lighted across the river as a variation of the bridge symbol, in which (as so frequently happens with variations) much of the unconscious repressed material has returned. By its form and the fact that it burns, the cigar reminds us of the male organ burning with desire. The gigantic gesture—kindling the cigar from one side of the river to the other—is eminently fitted to serve as a representation of the gigantic potency of a Don Juan whose organ we wished to portray in colossal erection.

"(b) His presence at his own burial may be explained by the idea that this phantasy of a double represents a personification of the chief part of Don Juan's bodily ego, namely, his sexual organ. In every sexual intercourse the sexual organ is actually 'buried' and of course in the same place as that of birth, and the rest of the 'ego' may look anxiously at this 'burial.' The psychoanalysis of numerous dreams and of neurotic claustrophobia explains the fear of being buried alive as the transformation into dread of the wish to return to the womb. Moreover, from the narcissistic point of view every sexual act, every sacrifice to woman, is a loss, a kind of castration in Stürcke's meaning, to which the offended ego may react with fear of death. Scruples of conscience, phantasies of punishment, too, may contribute to the fact that a Don Juan feels himself nearer to hell, to annihilation, with every sexual act. If we explain, with Freud, the Don Juan type of love-life—the compulsion to sequence-formation, to the conquest of innumerable women (Leporello's list!)—as a series of substitutes for the one and only love which is denied even to the Don Juan himself (the Œdipus-phantasy) we understand better the phantasy of punishment mentioned above: it requites for the supreme 'mortal sin.'

"Of course I do not pretend in these few lines to have revealed the hidden meaning of the Don Juan legend which still has many inexplicable traits (for example, I may hint at the probably homosexual signification of the lighting of one cigar by another); I only wished to give a confirmation of the phallic life and death symbolism of the bridge by its appearance among the typical symbols of death, birth and sexuality."

4. PFISTER, O.: *Plato: A Forerunner of Psychoanalysis*.—According to Plato, our author states, Eros, Love, is above all the instinct of sex or propagation. Plato did not in the least depreciate the part played in life by these instincts; the union of man and woman for the purposes of procreation was to him a holy thing, but love reaches still greater heights; it seeks the beautiful, and impregnation becomes a spiritual deed. Eros may be turned to the abstract, to the world of ideas and finally attains divinity. A modern student of Plato is quoted as showing "that all of the amplifications of the usual conception of the sexual instinct which

Freud has made, much to the disgust of so many academicians, are to be found in the works of the founder of the Academy (Plato)."

Pfister calls attention to a number of passages showing the identity of the conceptions. "For medicine may be regarded generally as the knowledge of the loves and the desires of the body, and how to satisfy them or not." "The best physician is he who is able to separate fair love from foul, or to convert one into the other; and he who knows how to eradicate and how to implant love, which is required, and can reconcile the most hostile elements in the constitution and make them loving friends is a skillful practitioner. Now the most hostile are the most opposite, such as hot and cold, bitter and sweet, moist and dry, and the like. . . . Love . . . since of all the gods he is the best friend of man, the helper and healer of the ills which are the great impediments of the happiness of the race. . . . Nearly all the technical, artistic and social activities arose from love; Plato mentions the following: gymnastics, agriculture, music, chivalry, poetry, archery, metal-work, weaving, art of government, the love for the beautiful and the good."

These indicate in but a fragmentary manner Plato's vision of the interaction of mental processes and the workings of the mind as a whole, a vision which Pfister states had been entirely overlooked by most until Freud again insisted upon them and provided newer technical methods for the study of this great synthesis in the unconscious. Here in this region also Pfister shows that Plato's conception of the unconscious as the source of religion, philosophy and the creative genius in general: "We must lay stress on the depth and breadth of vision which takes love as the basic force of the mind and as the creative principle, and follows it through all possible mental processes and actions, even going beyond the domain of experience into that of metaphysics. We do not accompany him into that territory which he himself describes only in mythological pictures, but we must still point out that such a careful positivist as Freud has also found in this source deep inspirations, which have proved of lasting value. In Plato we also find the beginnings of an evolutionistic mode of thought. Even the theory of sublimation is anticipated. No thinker in terms of evolution would object that the evolutionistic discipline was not maintained consistently throughout and that homosexuality, for example, was not recognized as the result of misdevelopment. In the same way we can not complain that Plato discovered neither specific mental connections nor general psychological laws. His work, as it stands, is a wonderful piece of prophecy."

5. COMMUNICATIONS. PFEIFER, S.: *Disappointment in Love During Analysis*.—An impotent patient very much taken with a girl who seemed to reciprocate. As he wanted to marry her he began an analysis. When he proposed several weeks later he was refused. The resulting condition

is the subject of the author's study. He could not work, although he tried. He could not remember anything said to him. For two days he seemed to have no feelings except a general discomfort. First he would suicide by pistol; then he would write a scornful and insulting letter. Insomnia, anorexia (liquids excepted) and flatulence also were present. Two libido mechanisms were revealed. After the injury there was total withdrawal of libido from the painful outer world, most elementary sensations not being perceived. The narcissistic libido-tension became excessive. This sought relief, "I believe in myself," he could whistle aloud and dance in his misery. The defense was insufficient, however. The wounding letter now was projected and the suicide ideas contained also related determiners. The regression now steps down the evolutionary scale. Anorexia, liquid food, flatus, are evidences of the oral, gastric and anal organizations. Violent bowel disturbances the author interprets as narcissistic. The patient now turns to the sister and a female cousin (mother imago). His sleeplessness, which is conceived of as a flight of the enhanced narcissism from further augmentation, as well as the fear of the claims of the repressed object-libido, is brought to an end by a saving-dream in which mother, sister and sweetheart are saved in one composite dream-picture. Further recovery is obtained through the growing transfer to the analyst.

RÔHEIM, G.: *Psycho-analysis and the Folk-Tale*.—An interesting rejoinder to a paper by F. C. Bartlett on Psychology in Relation to the Popular Story, too detailed to abstract.

HERBERT, S.: *A Child's Birth-Myth Story*.—A short note of the elaboration anew by a nine-year-old girl who, being rationally informed concerning the origin of children, of a complete birth-myth phantasy showing the need of elaborating unconsciously in her own language and images knowledge that she already had consciously.

## BOOK REVIEWS

THE HOMOSEXUAL NEUROSIS. By William Stekel, M.D., of Vienna.

Published by Richard Badger, Boston, 1922. Pp. 322. Price \$5.00.

This is decidedly one of the most stimulating and suggestive books that have been published on the subject of homosexuality. Dr. Stekel's views are more than interesting,—they are arresting,—and no one can undertake a review of this great subject and leave them out of serious consideration.

Very briefly, Stekel's views of homosexuality runs about as follows: He starts off with the individual as bisexual; he believes all individuals are originally bisexual, but that this bisexuality in the face of our modern culture is impossible to maintain. He therefore either represses the homosexual or the heterosexual component. In the latter case he becomes homosexual.

This is a very different view from that which is ordinarily held to the effect that the homosexual is homosexual through and through and was born that way and cannot be any different and has no possibility of getting over his difficulty. This throws homosexuality distinctly into the realm of the neuroses and the possibility of treatment and cure, although Stekel of course realizes the extreme profundity of the affection and the impossibility, in the large number of cases, of effecting any lasting results. This however, does not necessarily argue against the mechanism, nor theoretically against the possibility of its successful treatment. If Stekel is right, then homosexuality has possibilities for cure never before dreamed of, and it remains to elaborate the technique of therapy. The questions immediately arise in considering this mechanism as responsible for homosexuality: Why does the homosexual turn away from the opposite sex? What has led to the necessity for repressing the heterosexual component? Stekel presents a rich case material which goes to explain these mechanisms as well as to support his theory of a repressed heterosexuality. He shows, for example, that in the early history of these cases heterosexual experiences are invariable and then something happens which turns the individual away from the opposite sex. The events that lead up to this are pretty apt to center about some aspect of the family situation, such as an unduly virile mother, or a sexually predatory father, or what not. In any case, the net result is that the individual turns away from the opposite sex and to his own sex, and this turning away is induced by a sadistic attitude toward the opposite sex, in short being afraid of himself in his relation to the



opposite sex, because of his sadistic attitude toward them, he turns to his own sex for safety.

This fascinating book closes with a discussion of the social aspects of homosexuality and comes to the general conclusion that neurosis is one of the prices that we pay for our cultural advance, and that the monogamous ideal necessitates probably an increasing number of homosexual flights. The author suggests, however, that the homosexual should no longer be a subject for punishment through the mediation of the criminal law so long as his instincts are not used in socially reprehensible ways, that is so long as he does not undertake to seduce or to assault younger or weaker members of his sex, but carries out his trends with other homosexuals by mutual agreement. In fact if heredity plays any part in this neurosis it is much more desirable that the neurotic should, so to speak, voluntarily castrate himself by yielding to his homosexuality than that he should be forced into reproductive pathways in his effort to measure up to the social conventions to which he is unequal.

WHITE.

ALGUNOS ASPECTOS DE LA PSICOLOGÍA DEL NIÑO. By Dr. Honorio F. Delgado, with a Preface by Dr. William A. White.

Chapter one discusses the psychological criteria of to-day, that is to say, objective psychology and behaviorism, as well as the genetic psychology of which Stanley Hall was the pioneer. The importance of this point of view for studying the mentality of children is then taken up, and the correlation of the ontophylogenetic law is considered. A table is given showing the various stages of development of children, setting forth first the phylogenetic evolution, then the ontogenetic periods, next the psychological characteristics as they successfully develop in the individual, next the means of education and instruction and finally the resulting moral culture which should be attained in each of the successive stages of the individual life. In the text these topics are discussed separately and at length, and the author arrives at certain general precepts of pedagogy; for example that it should be the endeavor of education to place the individual in the very best condition for the development of those tendencies and aptitudes which make their appearance naturally in the different stages of the evolution of the personality, and to stimulate and cultivate these tendencies, properly administering moral and intellectual alimentation in such manner that when the vigor of the tendency weakens the best use of it has been made for the definite enrichment of the intellect in knowledge, the character in habits, and the temperament in tastes. The old pedagogical paths must be abandoned therefore. By these former methods the mentality of the child was mutilated and embarrassed according to ideas not in keeping with real conditions. The teacher, if he seeks to follow the methods indicated by

the psychology of to-day must adapt his teaching to the need of the child instead of imposing on the child the prompting of his own adult experience. Childhood should not be regarded solely as a period preparatory for adult years, but primarily as a moment of actual life, the values of which must be respected. Indeed from the pragmatic point of view, childhood may be considered as even more significant than maturity and the expression "the child is father to the man" has sound psychological foundation: Not only is the child anterior to the man in time, but he is nearer than the adult to primitive man—to our fathers in the dawn of humanity. The child though he has fewer years, is the older, for he has an older mentality. He is more man than the adult, because in him are incarnated the seeds and the possibilities of the entire race, possibilities which in each individual are reduced and obliterated by maturity, because maturity is a limitation and a differentiation, a goal that has been attained.

In chapter two, under the head of the geneticopropective significance of the experience of infancy the author discusses the innate and acquired tendencies of the individual. The conduct and mode of thinking of each individual, in regard to a given object or situation is different from that of his neighbors, because the activity of his mind depends not only on the sensation transmitted to him by his senses but also upon his entire anterior experience—the present image in association with all the residuals of the past, and this past is never the same in any two individuals. The sum of all the experiences which have fallen to the individual is the geneticopropective value of the personality. The child comes into the world endowed with the capacity to realize certain acts in a reflex manner. To these are added, through acquired experience, the conditioned reflexes in Pavlov's sense. Education in the school and in the home is an elaboration of this principle of the conditioned reflex. In this connection are mentioned the attitudes of the child toward the father and mother or their substitutes and the measures are discussed which should be taken to avoid or correct harmful attitudes, such as revolt, etc. In concluding this chapter the following precepts are given for the guidance of the teacher, as being of paramount importance for the affective personality of the pupil: The teacher as well as the parents should handle the child with affection and should strive to receive in return, not only the affection, but the obedience of the child. The teacher should untiringly endeavor to comprehend the sentimental necessities of his pupils, striving at the same time to make them sensible of the interest he takes in them. Only under these conditions can the teacher contribute constructively to the personality, only thus contribute to the future efficiency of his disciples.

In chapter three the formation of the personality and character are considered. The personality is a subject which embraces the entire field of psychology and the author therefore does not seek here to give a

thorough discussion of the question, but merely to call attention to some of the more interesting aspects of it from the pedagogical point of view. The libidinous origin of the personality is considered; the relation of the character to physiological activities, and the phases of the infantile libido. The stages of development of the libido are divided into autohedonism, organ hedonism, and social hedonism, and the historicocharacterological value of each phase is set forth. The fundamental types of character, *i.e.*, the introverted and the extraverted are described. Finally the use of sublimation as a pedagogical means of perfecting the character is set forth as follows: It is possible to act pedagogically on the character in harmony with the natural progress of development discovered by following the evolution of the character of the child. This pedagogical intervention should be based on the principle that the object of the libido—or the reality to which it comes to adhere—is susceptible of substitution, or what is the same thing, the infantile interests which are purely physiological may be transferred to interests which are moral and social. This is what is called sublimation in psychoanalysis. It differs from repression in that, in the latter, inferior desires are more or less brutally inhibited, while sublimation, as a preliminary step, incites to more elevated strivings and by an insensible process brings about the abandonment of the inferior interests. It is most harmful to repress a tendency or desire without having created another channel into which, in conduct or thought, the energy may be diverted. The teacher should habituate himself to see in every act the expression of a tendency looking toward the future and should never regard the act as a deed standing alone. The tendencies of the individual once ascertained, it is easy to give them a superior application. This above all else is the office of the teacher.

Chapter four discusses the use of psychoanalysis in the schools. The progress of mental hygiene in the school calls for the use of psychognostic methods as a constructive factor in education, the purpose of which is the conservation of the vital interests of the child. Not only should a careful and solicitous auscultation of the child's lungs be made (a duty falling to the medical inspector), but an auscultation, so to speak, of its mind, which is the most valuable and delicate organ the child possesses and the one capable of the highest development. Psychoanalysis is the instrument to be used to this end, and its systematic application will be of extreme value in the following directions: (a) as a curative treatment for psychic disorders already established or in a nascent state; (b) as a prophylactic measure, especially where there is pathological predisposition; (c) as a means of securing adaptation to conditions of life; (d) as a means of increasing the efficiency of the personality; (e) as a means of developing character; (f) as a means of sexual education; (g) as a means of moral education; and, (h) as a means of rendering the individual capable of attaining the greatest happiness possible to him.

The form of psychoanalysis which it is proposed to incorporate in pedagogic technique is the method based on the principles proved beyond all doubt and positively established by experience, in the work of Freud, Adler, Jung, and others. This method may be applied to pupils in the measure required by individual necessity, and always with discretion and tact. In some instances, possibly, the psychognostic method employed may not be the Freudian analysis, but merely psychological analysis; or the conduct of the pupils may be simply guided by psychoanalytic critique, without psychoanalysis strictly so-called.

The systematic use of psychoanalysis in the schools would necessitate specialization in this branch of the science, together with extensive preparation in psychological and psychognostic directions, as well as the education of teachers in the theory and practice of psychoanalysis (beginning with autognosis—the most necessary qualification for the teacher). Physicians should undertake the analysis of the pathological cases and those in which teachers would find their intervention necessary. Teachers, for their part, should make systematic annual examinations of all class members, and additional examinations whenever the condition of class members seemed to call for them. Both physician and teacher, of course, would impress on each class member how necessary it is for him to make the best use of his moral and psychic forces and to strive toward the highest mental and social development in harmony with his actual necessities, experiences, and personal problems.

In chapter five the author sets forth the importance of teaching a philosophy of life founded on individual psychology. The author defines in particular the mission of philosophical pedagogy: It is a fact proved to-day by individual psychology that from the very beginning the individual is strongly oriented toward the future. His spirit constructs ideals. That is to say autogenic principles of direction or fictions which may be called pragmatic are built up and elaborated. The individual has a veritable double in which all his aspirations are amassed; in other words, at an age much earlier than was until recently suspected, the individual has need of a philosophic system to adapt himself to life. For this reason it is most important to give the child a philosophy fitted to his future, thus preventing him from dissipating his energies in partial visions and egoistic abuses. In answer to the question whence the way the elements of this philosophy of life be obtained, it may be said that not in vain have the great men of the past lived. They are, as it were, mighty guiding lights—the philosophers and poets who have left permanent stories of wisdom, of which, as Taine says, humanity has not hitherto made adequate use. The great ideas given utterance by these masters are transformed into powerful functional agencies—into creative forces of which humanity may make use. It was doubtless because he perceived the value of this method of teaching that Kant said in a letter to Mendelssohn

"The true and enduring treasures of the human race are contained in metaphysics." Civilization has been following a false route in modern time and has robbed man of life, of true life. The great complexity of modern external life and the lively development of civil institutions have had as result an ever increasing restriction of the possibility of differentiation and spontaneity of the intimate ego. The tyranny of industrialism, machinery, the technical demands of trades and professions have diminished the sense of living. Economic dominion has altered the center of attraction of life, giving life an artificial orientation. A philosophy of life in the right direction is the only salvation for man—the only hope that man may become superior, integral, eupsychic, omnibiotic and anthropotenic; in other words that man may have a completely developed mental organization.

The practical question of a great pedagogical undertaking of this sort has three aspects:

(1) The extraction of the treasures of thought along these lines, put forth by psychoanalysis and by individual and psychogenetic psychology, and the organization of the same. For this the coöperation of philosophers, psychognostics, pedagogists and masters in other sciences would be necessary.

(2) The preparation of teachers and administrators to undertake the project.

(3) The initiation and continuation of the program.

In presenting his project the author says that if it is regarded as nothing more than a Utopian dream it is because those who judge it have not risen to the level of development of the present time. If it fails of practical application, this will be because people in power are not the progressive people. Germany attained the first place among the nations because she made intensive practical application of the maxim "Durch Kennen zum Koennen." When it is seen that the great majority of mankind is indifferent to categoric imperative of knowledge the boutade of Rudyard Kipling seems justified. Speaking of some seals who did nothing but fight purposelessly, the great poet says: "for they were just as stupid and unaccommodating as men."

CLARA WILLARD.

SOME APPLICATIONS OF PSYCHOANALYSIS. By Dr. Oskar Pfister, Pastor in Zurich, Switzerland. Authorized English version. New York: Dodd, Mead & Co., 1923. Pp. 352.

Several years ago, in 1917, to be exact, there appeared the English translation of a work by a Swiss pastor, ambitiously called "The Psychoanalytic Method." Nor did the book altogether fail to redeem the promise of its title. Without any especial claim to originality, Dr. Pfister set forth in those 600 pages a fairly comprehensive outline of



the method, illustrated by many examples of its application, examples chiefly taken, as might have been expected from the author's vocation, from children and adolescents.

In his present book he has attempted to enlarge somewhat upon his theme. One might imagine that, having defended his espousal of psychoanalysis to his colleagues and having proved to them, by his own example if in no other way, that the psychoanalyst himself is not necessarily branded with the mark of the beast, he had wrung from them a reluctant assent to the doctrine that it was a legitimate method. "But," they might say, "Suppose that it is useful in a few, carefully selected cases of nervous disorder, is it of any other service to humanity?" This book is the answer to that question.

Pfister begins with a résumé of the whole subject, repeating much of the material of "The Psychoanalytic Method." The next part of the book is occupied with an attempt to show some of the psychic sources of artistic inspiration. The method used is a study of ten pictures painted by an artist whose psychic life was being investigated to some extent by Pfister. Five of these were painted under the influence of introversion and five under the influence of regression. The text itself is quite interesting, but the pictures themselves are not reproduced in this edition, and so this section of the book loses most of its value. Next comes a short chapter called "The Psychology of Peace and War." This contains nothing important. Of more value is that third of the book devoted to interrelations of psychoanalysis and philosophy. He insists upon Freud's status as a positivist and alludes to his position as regards the moral problems of the patient as one of ethical positivism, a rather clumsy expression. Discussing metaphysics, he quotes the attitudes taken by Freud, Ferenczi, Rank and Sachs, Silberer, Putnam, Jung and Maeder, commending especially Freud's cautious advance into metapsychology. Coming to the question of ethics, Pfister, as might be expected, finds it difficult to formulate any rules, merely saying that the analyst should be as sparing as possible of advice and hoping that psychoanalysis "will give an impulse to fruitful spiritual movements and revolutions."

Pfister's chapters on psychoanalysis and child life are particularly disappointing. As a pastor and a pedagogue, it might have been expected that he would have made a great many observations of value. And no doubt he has done so. Unfortunately he does not impart them with any lucidity. The impression is of a benevolent, energetic pedagogue, radiating optimism, thoroughly convinced of the merits of the psychoanalytic method, but yet wholly unable to communicate his enthusiasms. Aside from giving the fairly obvious information that a knowledge of the method aids a teacher in understanding the emotional difficulties of



his pupils, there is very little. One good phrase there is: speaking of academic psychology, he says, "The psychology of childhood is suffering from the childishness of psychology."

When one comes to Pfister's account of the value of psychoanalysis in religion, especially in missionary work, a further disappointment is experienced. Instead of an account of the ways in which this science might be able to help the minister to self-knowledge and his parishioners to adjustments of psychic conflicts, we have here an argument for the one true religion—Pfister's own, of course. In his "What Is Man?" Mark Twain says:

"I have seen several entirely sincere people who thought they were (permanent) Seekers after Truth. They sought diligently, persistently, carefully, cautiously, profoundly, with perfect honesty and nicely adjusted judgment—until they believed that without doubt or question they had found the Truth. *That was the end of the search.* The man spent the rest of his life hunting up shingles wherewith to protect his Truth from the weather . . . if he was seeking after the Only True Religion he found it in one or another of the three thousand that are on the market. In any case, when he found the Truth, *he sought no further*; but from that day forth, with his soldering-iron in one hand and his bludgeon in the other he tinkered its leaks and reasoned with objectors."

So Pfister classes all other religions as hysterical or neurotic and recommends elimination of their manifestations and the "introduction of the Protestant religion, which is free from neurosis." The Japanese and the Chinese are to be instructed by the missionary that their religion is merely indicative of father fixation, the Brahmin and the Buddhist learn that their Nirvana is a catatonic paradise. In his next edition Pfister should warn the Freudian missionary not to steep the pagan so deeply in psychoanalysis that he begins to cast an analytical idea at the Christian religion itself.

LIND.

CONFLICT AND DREAM. By W. H. R. Rivers. Published by Harcourt, Brace & Co., Inc., New York, 1923. Pp. 195.

Dr. Rivers' untimely death removed from the arena of psychoanalytic controversy the most accomplished and scholarly of Freud's critics. Psychoanalysis has attracted an enormous amount of criticism, but very strangely only in exceptional and rare instances has this criticism come from persons who were both judicially minded and well informed. Dr. Rivers was one of these exceptional individuals and he presents in the present book, which was published posthumously and unfortunately was therefore not carefully revised by him, a careful and detailed criticism of the psychoanalytic viewpoint, particularly that of Freud and his followers,

as to the interpretation of dreams, offering his own material to make his points.

Very briefly, the author's important differences with Freud consist in the main as follows: He does not believe that the dream is always wish-fulfilling, but that not infrequently the dream is the very antithesis of a wish. He believes that the dream is the result of a conflict and is an attempt at a solution of that conflict, and that the affect depends upon the degree of the success of the solution. If the solution is successful the affect is one of pleasantness—if unsuccessful, the opposite. He approaches the problem of symbolism in a quite different manner from the psychoanalysts. He believes that dreams may occur at different levels of depth, so to speak, depending upon the depth of the sleep, and that in this regressive direction mechanisms are successfully brought into activity which are more and more infantile and primitive in type. A deep sleep, with dreams, brought about by primitive mechanisms, uses primitive methods of thought and results in symbolism. A dream at a high level, near the level of wakefulness, is expressed in terms approximately like those of adult thinking. He does not believe that sexuality is universally at the bottom of all dreams, although he acknowledges that in neurotics it is probably very frequently so. The change from a periodic expression of sexuality in animals to its almost continuous activity in man must have necessarily resulted in its playing a very frequent rôle in psychological activities. He does not believe that the dream is primarily the guardian of sleep, but that it arose biologically as a mechanism of protection whereby the aggressive instincts of the animal might be brought into activity, even before waking, to meet a foe that had been apprehended through acutely sensitive sense organs while the animal was yet asleep. He thinks the nightmare the primitive type of dream. He places very much more weight upon the conflicts in the dreamer's present life than upon his early infantile experiences, and although he acknowledges the necessity for the deeper analysis in order to uncover the personality trends which are essential to a full understanding of the individual, still he does not believe that this is necessary for practically dealing with the actual symptoms and situations in a large number of instances.

The editor of the book, G. Elliot Smith, has added a very interesting appendix on the interpretation of myths.

This book should be read by all who have a deep interest in psychoanalysis, and while it would be easy to find fault with the author's conclusions and to draw attention to shortcomings in his arguments, it is nevertheless desirable that careful judicial criticism such as his should find its way into the psychoanalytic literature. It is essential for the best success of psychoanalysis that it should be able to accept such criticisms in the spirit in which they are made and with an open mind and go on, thus broadening and deepening its outlook. In this manner will it become

finally accepted and assimilated into the great body of scientific thought, where its proponents believe it belongs but from which most of its critics would still exclude it.

WHITE.

THE HOPE OF THE VARIANT. By John George Gehring. New York and London: Charles Scribner's Sons, 1923. Pp. 252. \$2.00.

The book is an effort on the part of the author who has devoted thirty years as the head of a private sanatorium in the treatment of functional diseases to elucidate on the methods which in his hands have produced many cures.

Sufferers from all forms of functional diseases are treated in the book under one common term, "Variants." A variant is being defined as "A sufferer from functional mental disease who in one way or another varies more or less from the hypothetical or arbitrary average."

"The variant who is a potential neurasthenic psychasthenic or the subject of any other functional malady is born handicapped, he inherits family traits of ability or mediocrity, of vice and virtue, of health, disease and crime as well as various physical desirable and undesirable characteristics. Such individuals who are unfit are often so because they demand of themselves that they conform with the majority whereas they should be taught that all they need is to conform only with themselves." An all embracing term as variant applied to the great variety of functional disorders would of course preclude any scientific exposition of the subject and in vain will the reader look for any critical analysis or proof of the author's deductions or methods of treatment.

We are told that attention to the gastric disturbances, which the author invariably finds in all of his cases of neurotic or psychic disturbance, and direction that the patients do so and so produce cures of obsessions, depressions or paranoid states. Thus a case of Kleptomania in a refined lady is cured by telling the patient that each time the desire came into her consciousness to secrete in her trunk a book which did not belong to her she was to sit down at her desk and write out exactly what was passing in her thoughts.

At her next impulse to steal she did as the doctor directed and when her impulse expressed itself in written words: "I am about to secrete a book which does not belong to me—to steal it—" the act, the author assures us, became an impossibility and absurdity. It reminds the reviewer of the advice given him by his school teacher to count ten very slowly whenever he got angry and was ready to fight or say something foolish, needless to say that the counting was nearly always forgotten. Most of the cures, however, were produced by suggestion which the author uses in various forms such as direct suggestion, consisting merely in telling the patient that a certain symptom will disappear or that he will no more be troubled by a doubt or fear; indirect suggestion—made

in the presence of the patient to the nurse or members of the family and suggestion with the conscious coöperation of the patient.

In none of the methods used must the always present digestive disturbances be overlooked. Many cures are cited and the author's enthusiasm for his methods often approach that of the inspired believer.

That Doctor Gehring helped many of his patients no one who reads this book will doubt, but this was achieved not because of the methods used but by the unbounded sympathy which the doctor has for his suffering patients and because of the confidence he was able to inspire in them through his dominating personality. He would probably have achieved the same results if he gave his patients pink pills, exposed them to some colored rays or prayed over them.

The objection that those engaged in the scientific handling of the problem of functional disease have against such well meaning methods as used by Dr. Gehring is that they do not discover the cause producing the neurotic or psychotic manifestations and are satisfied when some of the prominent symptoms disappear to consider the patient cured. The obsession, fear or doubt present in various patients are, however, only expressions of more deeply rooted underlying difficulties and if one symptom is removed another will sooner or later appear.

It is like treating the patient's fever or cough instead of endeavoring to find the cause for such.

The author of the *Hope of the Variant* in spite of his enthusiasm for his methods is quite frank in telling us that he does not know how suggestion acts.

After citing the case of a woman fifty years of age who "lost" her ability to walk and whose power returned with several direct suggestions he states the following:

"Just how this took place we may not be able to explain—but it *did* take place."

Psychoanalysis is mentioned quite respectfully in one or two places but its lesson has entirely passed by the author. He considers it unnecessary to search for the causes of a fear, doubt or phobia present, stating: "Nor am I of the opinion that we need to search the remote recesses of the subconsciousness for memories of startling episode, oftentimes of a sexual origin, for the explanation of an obsessive condition which in most cases yields to methods that make no attempt to trace their origin to such sources."

Sex conflicts are quite a disagreeable subject to the author, who evidently can not conceive of any sexual episode or conflict which may predetermine psychic disturbance, other than self-abuse.

To the psychiatrist or the psychologist the book will be of much interest as a personality study of the author rather than for the psychologic exposition of his patients' difficulties.

The general practitioner, however, who may still conceive of his patient as a mere combination of organs, will undoubtedly find in the book much food for thought.

SILK.

STUTTERING, LISPING AND CORRECTION OF SPEECH OF THE DEAF. Second Edition. By E. W. Scripture, M.D., Ph.D., Professor of Experimental Phonetics, University of Vienna. Pp. 290, 120 illustrations and four plates. New York: The Macmillan Company, 1923.

The first edition of this book was published in 1912 in an attempt to meet the needs of physicians, teachers and others who are constantly confronted with the problem of the lisping or stuttering child. It was here emphasized that stuttering as such is not a defect of the nervous mechanism of speech and that its characteristics are not primarily those of articulation. Ten years of further experience with speech defects has confirmed the author's views.

The present edition represents a thorough revision of the former work, and Part IV has been added to introduce a much needed reform into the instruction of the deaf. Here is described a method of overcoming the characteristic monotony of the voice of the deaf, and also a chapter is given to the description of an apparatus, the Strobilion, for teaching control of the pitch of the voice by means of sight. A comparison of stutterers with other persons having mental peculiarities has shown that the trouble is connected with the emotions. Stuttering is therefore a psychoneurosis, a state of mind arising from excessive timidity and showing itself in a speech disorder that tends to secure a condition of segregation, thus enabling the person to escape occasions where he will be made to suffer. In this connection the author states that inasmuch as stuttering arises only in some cases of timidity and not in others, this fact must indicate the presence of some other element in the disease, the deeper cause varying from case to case. "In several cases there has been a determined effort to get rid of the trouble and perfect good faith on the part of the patient, yet I have had the feeling that at the bottom of his soul the patient did not really wish to be cured. This reminds one of some forms of hysteria, psychasthenia and neurasthenia where the disease is really produced by the patient in order to obtain some end, although he is absolutely unconscious of this self production."

As it is a mental disorder, its treatment must be mental, and it is here that the author emphasizes the success obtained by the proper use of psychoanalysis. In all cases the time of treatment is shortened by this method, but in addition to psychoanalysis, proper speech exercises are absolutely essential to restore the patient's confidence in speech.

By the use of general and special physiologic laboratory apparatus he illustrates the muscular and respiratory mechanisms of speech and its

disorders, and has devoted several well written chapters on the differential diagnosis of speech defects, discussing such topics as "Organic Lispings," "Negligent Lispings," "Stammering," "Tic Speech," "Cluttering," etc. The principles underlying methods of correcting these are well discussed.

While this book contributes very little novel or original to the psychotherapeutic aspect of stuttering, it deals comprehensively with the subject as a whole, and may be read with profit by those interested in children with speech defects.

LEWIS.

**THE POWER WITHIN US.** By Charles Baudouin. Translated from the French by Eden and Cedar Paul. Cloth. Price \$1.50. Pp. 196. New York: Dodd, Mead, and Company, 1923.

This volume is a simple presentation for the general lay reader of the author's view concerning the regulative functions of thought and imagination in the daily life of the individual. The subject matter is divided into eight topics or chapters, as follows: Thought as an Agent; The Physical Bases; Personality and Free Development; The Inner Life and Individualism; Concentration; Emotional Forces; Effort and Courage, and Personal Ascendancy.

The author writes at length upon the action of mental phenomena upon other mental phenomena, as well as upon the body through the working of natural law; he attempts to explain courage and moral energy, and characterizes genius as being the result of a common urge of all the energies in a single direction, the energies arising from tendency and instinct; here emphasis is laid upon the danger invited by repressing a vigorous tendency in order to pursue an alien occupation.

The entire production is entertainingly written and confined to descriptive statements and philosophic discussion of certain energies and powerful mental forces within us; however, it contains very little of value to those interested in the psychoanalytic viewpoint, although the author speaks favorably of psychotherapy in general, and of psychoanalysis in particular.

LEWIS.

**THE SUPREMACY OF SPIRIT.** By C. A. Richardson, M.A. Pp. 155. New York: Moffat, Yard and Company, 1923.

This little book for the general reader represents an attempt to write a less detailed and less technical account of the author's philosophical theories, which were previously set forth in his book entitled "Spiritual Pluralism and Recent Philosophy."

The first three chapters deal with the development of a general philosophical theory in which nineteenth century materialism is brought to



grief and in its stead is placed a monadal system modified after the original conception of Leibniz, and tending toward a monism which is essentially spiritual in nature, and supportive of immortality of spiritual existence. Here, in discussing the various trends and terms of expression of the several systems of philosophy, the author has fallen into the error shared by many philosophers, by apparently not recognizing the mere symbolic import of the terms used. The "materialist" and the "spiritualist" are thinking out the same problems and have arrived practically at the same conclusions, but use different word symbols in expressing their results, thus inviting unproductive controversy.

Several chapters apply the theories of the author to the relations of body and mind, and to the questions of the conscious, subconscious, and unconscious phenomena. Concerning the body—mind relation—the following quotation may be of interest: "Hence in early life the body plays the part of bringing the mind into more and more intimate and effective relation with the world around it. As this process continues the relation of mind and body becomes increasingly close and the mind gains a correspondingly more complete control over the body. This goes on until maturity, at which mind and body may be said to have reached the most complete and harmonious stage of their interrelation. But the mind is capable of developing still further, while the body is not. Henceforward the latter is a hindrance to the development of the former and the bond between the two begins to loosen. This loosening is manifested so far as the body is concerned by senile decay, while on the part of the mind it shows itself by gradual loss of control and a certain fixity or even retrograde movement in mental development. With the final dissolution of the mind at bodily death, however, these obstacles to the higher flight of the mind are removed. . . . Now the question arises as to whether perception, memory and imagination are dependent on the body in such a way that they necessarily cease at bodily death. The answer is that there is no logical necessity which compels us to accept this dependence. Perception, memory and imagination are functions of the spirit which owns the body—the dominant monad." He then concludes that bodily activity is an important condition of the full development of mental activity, yet the latter may quite well continue after bodily death. Certainly such speculations as these must not be taken seriously by the plodding thinker who is more actively concerned with the existence of things than with the persistence of the, as yet unproven entity—the Spirit.

After making some comments on the contradictions implied by the terms "unconscious," "wish," and "repression," as used by psychoanalysts, the author approaches the border line separating the individual spirits from other spirits and the spiritual community as a whole"; in short, he passes from psychology as such to the problems of psychical

research, and devotes a chapter to the discussion of such phenomena as multiple personality, certain hallucinatory experiences, phantasms, telepathic experiences, automatic speech, and automatic writing, and ectoplasmic productions, all of which he inclines to interpret mystically and to offer as proof of another type of existence. Such conceptions will be unsavory to the scientific investigator in psychopathology who already has much more satisfactory explanations of these peculiar phenomena, and tend to misinform the general reader for whom the book was particularly prepared.

Taken as a whole the book is worth having in the library of a student of philosophy.

LEWIS.

DUALITY, A STUDY OF THE PSYCHOANALYSIS OF RACE. By R. N. Bradley. New York: Moffat, Yard & Co., 1923. Pp. 186.

Corroboration of the main psychological principles outlined by Freud and his followers continues to pour in from diverse sources. Some of these sources are surprising. It is, of course, to be expected that those who go to such departments of knowledge as history, biography, drama, painting, music, wit, philosophy, and so on, equipped with the psycho-analytical technique, should be rewarded by significant data, but other fields seem at first glance remote.

Now comes an ethnologist, R. N. Bradley, author of "Malta and the Mediterranean Race," who finds in the study of his specialty unexpected verification. His thesis is, briefly, that mankind derives originally from two types which he alludes to as the long-heads and the short-heads, the former being African and the latter Asiatic.

By a series of ethnological arguments, which we cannot quote in detail here, he proves that, contrary to what is believed in certain quarters, Europe was originally settled by a long-headed race and later invaded by a short-headed one. The long-headed races, he says, are pliable, emotional, spiritual, with inclinations towards poetry and the arts. In contrast, the short-headed races are practical, muscular, possess strong will-power, are ruthless.

Physically, the Asiatic has squarely-set eyes, with poor sight, but strong jaws and good teeth. He is a biter, but not a seer. (Witness the Prussian.) The African has oval eyes, with good sight. The difference extends to symbols:

"The higher classes in the Roman Army are associated with the horse and the round shield, both Asiatic; the lower classes bore the long shield of the Mediterraneans. And it may be observed here that the symbol of the Asiatic is roundness, and of the Hamites or Mediterraneans, length: long head, long barrow, long shield; round head, round barrow, round shield; the difference is vital and permeates both character and culture."

Bradley likens the long-headed race to the unconscious, and the short-headed to the conscious. There is a constant and fundamental conflict between these races as there is between the conscious and the unconscious in the individual; as there is between the male and the female; in the one case there is love, with its ambivalent hate, and blending through marriage; in the other case there is war and an eventual blending of the races.

He makes other interesting analogies: the long-headed or unconscious race is feminine; the short-headed, masculine. It is noticeable that in the religions of the long-headed races there is the feminine Deity; in the more ancient ones, an Earth Mother who combines the qualities of Ge and Aphrodite; in the modern Catholics, the Virgin Mary. To the contrary, the short-headed races were masculine and patriarchal; they worshipped God the Father, an anthropomorphical Deity resembling the head men of their tribes.

In philosophy the long-headed man tends to the concrete; the short-headed to the abstract; the former is a Hegelian, the latter a Bergsonian. In disposing of their dead the Asiatic races tend to get them out of the way quickly, even by cremation; they do not recognize death; the African races erect mausoleums; their dead are always with them.

The English, Bradley says, are a short-headed race; the Irish a long-headed one. The Englishman extols male domination, is muscular, physical, takes cold baths, disciplines himself rigidly, wears a monocle (the short sight of the Asiatic type again, which has come to be associated with intellect—witness the inevitable spectacles of the German student), is calm and practical; he is business-like, honest and truthful. The Irishman is emotional, impulsive, ingratiating, intuitive, tactful even to mendacity, sympathetic, unstable, prophetic.

In ancient history the Greeks were the unconscious race; the Romans the conscious one. The legend of Babel typifies the conflict; the clash of Semite and Akkadian; of African and Asiatic.

From literature Bradley has drawn many apposite illustrations. Several recent plays show the English interest in the racial conflict: "Peg o' My Heart" and "Paddy the Next Best Thing." He alludes to the Civil War as an instance of the same conflict and quotes O. Henry's story, "Thimble, Thimble." But his chief example from literature is the Forsyte Saga of Galsworthy, especially "The Man of Property." In this a typical Englishman, an Asiatic, a man of property, a short-head, marries a very feminine woman, Irene, who typifies the long-headed race—the unconscious. The story of their conflict contains so many of the eternal verities that it has become the novelist's most popular book, and he has been constrained to carry on the theme through other volumes.

Indeed, wherever an author hits upon one of these fundamental psychological conflicts it seems to fascinate him so that he is loath to let

his character drop out of sight. Thus Compton Mackenzie created a Michael Fane, a feminine man, and Sylvia Scarlett, a masculine woman. He carried Michael through "Youth's Encounter" and "Sinister Street," and Sylvia through "Sylvia Scarlett." Through them all is a very feminine woman, Lily Haden, who attracts them both in their masculine moments. Finally he continues the theme—long after most of his readers have wearied of it—into "Sylvia and Michael," and brings them together after devious wanderings. So fond was he of these characters that he has let them creep into other books, "Columbine" and "Plasher's Mead."

It would take too much space to allude even briefly to all of Bradley's arguments. Now and then he cites, as it were in passing, an example which opens up a wide field for speculation. Thus:

"Suicide in Europe is from three to four times more frequent in man than in woman. Men hang themselves and women drown themselves. . . . Man belongs to the sky and the sun; woman to the earth and the water. The root *ma* means both mother and water." P. 125.

The book is not without its blemishes. Bradley seems to regard Maeterlinck as an inspired writer, full of deep, prophetic sayings and mysterious, occult wisdom. He cites among other things Maeterlinck's comments on the intelligence of the bee in constructing such a mathematically efficient cell. Of course it has now been demonstrated that the bee has nothing to do with the ultimate shape of his cell. And anyway the Maeterlinck myth has lost its power except among the most naïve.

Bradley also believes in all the hocus-pocus of pre-natal influence, and quotes with great solemnity old wives' tales of pregnant women being frightened by animals and bearing children with appropriate stigmata. "A pregnant woman had a strong desire for raspberries and her child was born with the mark of a raspberry upon its body." P. 159.

He also has a weakness for astrology and diviners and palmistry and spiritualism. He believes that Geley in his "From the Unconscious to the Conscious" has opened up a new era in evolution and philosophy, and says, a page later:

"Geley's conclusions are largely based on his experiments with the medium Eva. When hypnotized she produced from the orifices of her body a film of what Dr. Geley considers to be elemental matter, and out of this developed, while Eva passed through pains as of labour, hands and limbs and a beautiful face. This is an act of birth, an act of creation, an act of the unconscious."

But when Professor Bradley confines himself to ethnology he knows whereof he speaks. His thesis is an ingenious one, and he has gone far towards proving it. At least, he has pointed out to psychoanalysts the evidences of psychic conflicts to be found in the ebb and flow of races

over the world, a conflict not dissimilar to that which perpetually rages in the dark regions of the individual unconscious. LIND.

THE APPEARANCE OF MIND. By James Clark McKerrow, M.B. Pp. 120. London: Longmans, Green and Company, 1923.

This small volume represents a philosophical speculation dealing with *sense consciousness* and *thought consciousness* in a manner which attempts to substitute another "Immaterial Principle" for the concept of mind. The author in a "Pickwickian or Philosophic sense" denies the consciousness of the orthodox psychologists, at the same time admitting the practical advantages of expressing behavior in terms of consciousness. The author mentions a tendency on the part of those acquainted with his theory to identify it with Behaviorism, but certainly this is quite difficult to comprehend, since one trained in Behaviorism as it is understood by the American school of investigators fails to discover the least similarity in the two concepts.

Among other things which McKerrow has emphasized, he advises a substitute for the subject with its cognition, affection and conation in the form of a single principle which he explains at length in the text, the tendency to "Viable Equilibrium," or the tendency toward viability in a biochemical sense, which concept, we must agree, has its advantages as a working hypothesis since it is far more basic and less occult. Theoretically both man and the universe is here regarded as a series of conditioned events, but practically we must be considered responsible for our actions which occasion praise or blame, love or hate, or perhaps indifference from the herd.

A thread of humor runs through this book, serving to hold the interest of the reader.

LEWIS.

THE BIRTH OF PSYCHE. By L. Charles-Baudouin. Translated by Fred Rothwell. London: George Routledge & Sons. New York: E. P. Dutton & Co., 1923. Pp. 211. Price \$2.00.

It is a not uncommon thing to hear it said, "If I could only write well some of the adventures I have had, what a novel it would be!" On inquiring into these same adventures we find only the most commonplace events. And yet the speaker was right. Being born, getting married, and dying are tremendous adventures, and they are universal. But only once in a while they are recorded properly, and then they take on epic proportions. Described by the pen of a Gorky, the passions of a peasant are heroic; seen through the golden glasses of Robert W. Chambers, love and mating and death are the antics of barnyard fowls.

But always in the eyes of himself will a man's life seem gilded with

the colors of romance. His childhood is to him a sacred memory, replete with wonderful adventures. So every novelist writes at least one autobiographical novel. "David Copperfield," "Pendennis," "The Making of an Englishman," "Youth's Encounter," "The Early History of Jacob Stahl," "Clayhanger," "Tom Sawyer," "Moon Calf," "Of Human Bondage," "Portrait of the Artist as Young Man"; the list stretches out indefinitely.

Or, if not a novel, he scatters the fragments of himself through his writings. When his heroes greatly dare, when his villains rant, when his lovers moon together, it is but the child within him phantasying. Even so, many years before, did a wide-eyed little boy dream of being a general or a prize fighter, or a big-league ball player. As successfully as he can recapture that spirit of make-believe so closely will his characters take on the hues of life.

With our English novelists there is an inclination to stand apart from his characters, to present them with all the detachment of the manager of a puppet show. In early Victorian times this tendency took the form of occasional moralizing by the author. Columbine stood poised on the tip of one dainty foot, Harlequin's grin remained frozen on his face, and Pierrot stood rigid in the middle of a passionate gesture, while the author poked his solemn head out through the back-drop and began "Thus, dear reader, we see ———."

But now this moralizing takes on a subtler form. The novelist begins with his hero in swaddling clothes and traces step by step his growth. And if he can recapture the savor of his own past and translate it into terms of the universal he is successful.

Sometimes he makes no pretense to the novel form, but presents under various titles the recollections of his childhood. Quite naturally this calls for an abandonment of self-consciousness, a baring of the soul for all to see. And this is better done perhaps by the French writer than by the British. We see it "*Du Côté de chez Swann*" by Marcel Proust, an autobiography disguised as a novel.

And now comes Charles-Baudouin with a sheaf of memories from his childhood. He has given his book the fanciful title of "The Birth of Psyche," meaning apparently the quickenings of a soul under the successive stimuli of environment.

The book itself for some symbolical reason is bound in pink and white and light blue. At first glance these colors would seem to us to represent with the greater felicity the fabled birth of Psyche's mother-in-law. The pink of dawn, the blue of the sea, and Astarte rising out of the foam.

The author was a shy, sensitive French boy whose days were filled with phantasy and myths, sometimes with terror. Snowflakes he fancies are tiny white flies and each of them has a wonderful name. "Camaralzaman!" he calls, and a little white flake darts out of the void and



perches on his finger. At night mysterious gray-clad women roll silently up to him and stare menacingly. (As a very little boy he has inquired if women have legs, those useful members being completely hidden by long skirts in those days.) He has visions of his father being dead. He has his triumphs and defeats at school, far more memorable than any in later life.

All these recollections Charles-Baudouin has set down with an air of verisimilitude. They are, as nearly as he can remember now, the actual experiences of his childhood. How much they are distorted by the passage of time and the remolding of the censor it is impossible for the casual reader to tell. They are told, however, with a charm that is not wholly lost even by their translation from an alien tongue. Not that we would criticize the translator, but the book is in reality poetry, and one can almost count on the fingers of a hand the successful translators of poetry: Chapman, Edward Fitzgerald, Poe, Andrew Lang, Swinburne, and, curiously enough, Longfellow.

Even aside from its intimate personal charm the book is a notable contribution to the psychology of childhood.

LIND.

RUBBER AND GUTTA PERCHA INJECTIONS. By Charles Conrad Miller, M.D. Chicago: Oak Printing & Publishing Co., 1923. Pp. 99. Price, \$1.75.

This little book is a contribution to plastic, especially cosmetic surgery.

With the aid of melted rubber Doctor Miller has been able to raise depressed noses and correct other irregularities of featural contour. It would be interesting to note what effect such beautification might have upon the psychic processes of a patient who was suffering from an inferiority complex as the result of some facial blemish.

LIND.

DISEASES OF THE NERVOUS SYSTEM: A TEXT BOOK OF NEUROLOGY AND PSYCHIATRY. By Smith Ely Jelliffe, M.D., Ph.D., and William A. White, M.D. Fourth Edition. Pp. 1119, with 475 engravings and 13 plates. Philadelphia: Lea and Febiger, 1923.

A few decades ago it was possible for the nimble-minded medical student and physician to acquire a more or less complete working knowledge of all medicine, both as an art and as a science, but since constant and progressive investigation has so enlarged the circle of facts, with their methods of application, a tendency to specialization has necessarily developed. Undoubtedly specialization in the medical sciences has led through concentration of effort to various brilliant epoch-making discoveries in the realm of research, but it is quite evident that this trend has frequently produced results which tend to lose sight of any concept of

the organism as a whole, thus failing to correlate important findings with those in other fields of endeavor; moreover, it is to be regretted that most of our textbooks written particularly for students are arranged according to the plan of superspecialization, wherein biological laws in general and psycho-biological laws in particular are frequently distorted or subordinated to fit a more narrow scheme of application, or to support the more technical details of some procedure. Although there may be certain advantages in presenting texts in a fixed, or static form, the knowledge of the biological sciences is in such active stages of transformation that it is more desirable for the student to be impressed with a dynamic viewpoint. Apparently with this in mind the authors have continued in the fourth edition of their well known textbook to describe the diseases of the nervous system from a dynamic standpoint, around a conception of the individual as a reacting unit, in which the nervous system is the organizer and coördinator of all experience—phyletic as well as individual.

This consideration of the organism as a unit in which all inherited possibilities and personal experiences are integrated in such a way that energy from the cosmos is captured, transformed and delivered, and that diseases or disorders of the integrated systems produce distortions in the behavior of the organism as a whole, should contribute tremendously to the present-day tendency to do away with the utterly impractical concept of separation of mind and body, and it is just this attitude which makes the book something more than an ordinary textbook.

It departs from the usual neurologic textbook style by its practical division of the subject into three sections representing stages of evolution of reaction mechanisms: (1) The neurology of metabolic transformations with specific considerations of the vegetative nervous system, the endocrine disorders, and of constitutional peculiarities, (2) the neurology of sensation and motion, wherein disorders of the nervous system such as inflammations, degenerations, scleroses, vascular diseases, malformations, and neoplasms are excellently described and illustrated for the several segmental levels, and (3) the neurology of thought and behavior with the modern analytic interpretation of the behavior of the psychical or symbolic systems describing the neuroses, the psychoneuroses and the psychoses as distortions of these systems. This section emphasizes many important mechanisms which are more primitive and fundamental than consciousness and the understanding of which must be clear in order to adequately comprehend human reactions.

The work presents neuropsychiatry as a living, growing, dynamic subject, and the excellent illustrations, the numerous particularly well selected references to the literature, and the logical arrangement of the subject matter should be a great aid to the beginner as well as to the advanced student.

LEWIS.

SOME ASPECTS OF THE LIFE OF JESUS FROM THE PSYCHOLOGICAL AND PSYCHOANALYTIC POINT OF VIEW. By Georges Berguer. Translated by Eleanor and Van Wyck Brooks. Published by Harcourt, Brace & Co., New York, 1923. Pp. 332.

The French original of this book was reviewed in THE PSYCHOANALYTIC REVIEW for April, 1923, p. 232. We welcome it in its English translation.

WHITE.

PERSONALITY AND SOCIAL ADJUSTMENT. By Ernest R. Groves. Published by Longmans, Green and Co., New York, 1923. Price, \$1.40. Pp. 296.

This book is an achievement in condensation. In the space of less than 300 pages large print octavo it gives a summary of modern scientific thought on a wide range of topics related to conduct.

It is addressed primarily to the teacher and the parent, but the material it contains should be of equal value to the social worker and others who have to deal with problems of human behavior; and, moreover, not only the responsible adviser studying the difficulties of those under his guidance, but the individual trying to satisfactorily adjust his own life may well derive benefit from reading it.

The terminology is not too technical for the man in the street and the viewpoint is hopeful and practical. Mr. Groves, who is professor of sociology at Boston University, writes from experience as an educator and a friend in helping persons considered normal to work out their conduct problems. The book is based also upon study of modern publications of varied types on psychology, psychiatry and sociology.

The author is catholic in his tastes. He quotes MacDougall and Watson, Freud and the anti-Freudians and others equally far apart in their views. He upholds psychoanalysis and stresses its importance.

The writer is rendering a service by setting forth for others what he himself has found instructive and helpful in his experience and his reading. He has done this with great clearness and simplicity.

As compared with what one finds in a book such as "The Kingdom of Evils," Mr. Groves has employed but little the case study method of presentation. He cites a limited number of cases, but says that "It has been impossible for the most part to make use of this material concretely, because, even if names were withheld, the recording of these consultations would appear to the persons involved, a breaking of confidence." He states, moreover, a restriction of his experience in work with individuals in that most of the appeals to him from college students for help in handling emotional disturbances have come from those in the last years of adolescence and also that he has not attempted to deal with the serious cases, but has passed them on to the psychiatrist with the result that he has not had the full explanation of their trouble. He lays no claim to

being a psychiatrist himself and his treatment of his subject matter throughout is extensive rather than intensive. E. W. DINWIDDIE.

ABERRATIONS OF LIFE. A Sequel to "The Appearance of Mind." By James Clark McKerrow, M.D. London: Longmans, Green & Co., 1923. Pp. 107. Price, \$2.00.

This little book is an attempt to apply the theories of the author's "Appearance of Mind" to some of the phenomena of life, especially in the realm of psychopathology. Mr. McKerrow holds that certain conditions are viable, or tending to life, such as sunshine, smiles, good news, bright colors, quick music, activity, youth and change; and that others are unviable or tending to death—shadow, tears, bad news, drab colors, slow music, old age and monotony. Another expression of the antithesis is comic and tragic.

He supports his contentions by a somewhat muggy psychology, garnished but not ornamented by a heavy-handed facetiousness. LIND.

A PLEA FOR MONOGAMY. By Wilfrid Lay, Ph.D. New York: Boni and Liveright, 1923. Pp. 305.

This book is a sexology or an erotology dealing with such topics as the true conception of marriage, modern emotional unrest, the emotions, the instincts, the love episode, unhappy marriages, hologamy and prostitution, in which the author attempts to show how husbands and wives can so control their sexual situation as to maintain a true eroticism that will tend to lessen both prostitution and divorce, as well as make more unnecessary the tight bond which operates to make many marriages an imprisonment for those concerned.

Throughout the book there is much repetition to emphasize the rôle of the husband in marriage the real happiness of which depends solely on his consciously planned intelligent behavior which must dominate the erotic situation. Any love is essentially effeminate and not virile when it depends upon being charmed by a woman. The man should be the charmer, and the moment he surrenders to her charm he becomes an autoerotic child, so any marriage depending upon the wife's charm is bound to dissolve actually or potentially. It seems that the author has used the term *charm* here much too loosely; it should be better defined, and perhaps differentiated from *attraction* as the word is understood in the popular sense.

The husband who does not dominate the erotic situation, but is hasty, thereby demonstrates his mental autoerotism, he loves himself, or the results his wife produces in him. Psychoanalysis has proven that no woman can be dominated by an infantile man who is seeking the mother image in his love life, since it is only by the exercise of a self control

which in the love episode brings about the woman's erotic acme first, that domination and erotically perfect mating is maintained. Any man who is incapable of thus controlling the situation must be considered as undeveloped and in the class of autoerotic infants.

The following points may be offered as a summary of the contents of the book: (1) The man's control of the love episode is essential to perfect union with the woman. (2) Haste on his part with an early relaxation of the sexual tension is due to his own anesthesia or ignorance of the woman's requirements. (3) All women continually unconsciously testing a man's physical strength—the autoerotic male will be found deficient in this test. (4) There is a tendency on the part of women to be coy, bashful, modest, reserved and retiring, which is biologically the remnant survival of the subhuman characteristic of the female always facing away from the male during the sex act. Man has a tendency to misinterpret this in order to convince himself that he is master of the erotic situation. (5) Human sexuality has made a fundamental distinction between procreative and erotic love episodes, which has practically obliterated the periodicity factor characteristic of animals, and so erotic values, further differentiating man from animals, have developed. However, many husbands still go through the love episode as if they were animals striving for a hasty, selfish orgasm, or merely procreating progeny. (6) Unconsciously the man does not wish to find the woman richer (more erotic) than himself because it gives him a sense of unconscious inferiority, injuring his feeling of control, and giving him the impression that he is mating with an "oversexed" woman which means basically the evil mother with tendencies to prostitution.

To the author, monogamy on the basis of total physical and psychical fusion of man and wife as outlined in his book would tend to correct some of the modern disorders of civilization.

LEWIS.

CHARACTER AND VOCATIONAL ANALYSIS. A Course of Forty Simple Lessons in Vocational Adjustment. By Joseph Ralph. Los Angeles: The Pacific Institute of Vocational Analysis, 1923.

There is a story attributed to various literary celebrities. It is of a famous editor who, when he received a book, was so kind-hearted that he would mention only the good things about it. One day he examined a volume at some length before he was able to frame a review. Finally he hit upon it, "Mr. Blank's book," he wrote, "is excellently well-bound."

Without drawing too close an analogy, we wish to call attention to the cover of Mr. Ralph's new book. It is full imitation morocco, somewhat after the manner of the family Bible. On the front is a gateway in a brick wall, labeled "Vocational Adjustment." The gates are ajar, and through them leads a path on which is written "Open For You." Over

the horizon the path leads to a rising sun marked SUCCESS in large letters. The effulgence of this sun casts its glow over the title above and the author's name.

Between these somewhat garish covers is a treatise on the choice of a vocation. This is an exceedingly timely subject. If there is one way in which psychoanalysis has been of practical and demonstrable value to the world at large it is in the sphere of the choice of a vocation.

Unfortunately, Mr. Ralph has not developed the subject in any particularly helpful way. His treatment is, in fact, rather phrenological. He begins by a discussion of several racial types and their characteristics. Then he passes on to a discussion of various occupations and the types of personalities best fitted to succeed in them. Included in this disquisition are pictures of 31 types of features, each labeled as denoting a specific sort of personality.

This sort of speculation is fascinating, but rather too likely to lead the enthusiastic investigator astray. It is all very well to generalize about cranial indices and physiognomies, and the modern psychologist does indeed bear racial and personal types in mind among other things. But I do not think any scientific psychologist would approve the following statements: "The engine operator should be more inclined to be dark-haired and dark-eyed than fair-haired and blue-eyed, for the latter are always index features of restlessness" (p. 302); "The doctor . . . must be long from the ears to the eyes" (p. 319); "No big, raw-boned, blue-eyed, fair-haired Nordic will be successful as an advertisement specialist" (p. 293); these and many other similar statements savor too much of phrenology to be acceptable to the scientific mind.

The book is interesting as an exercise in speculation, but should not be taken too seriously.

LIND.

NOTICE.—All business communications should be addressed to The Psychoanalytic Review, 3617 Tenth Street, N. W., Washington, D. C.

All manuscripts should be sent to Dr. William A. White, Saint Elizabeth's Hospital, Washington, D. C.